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ABSTRACT

This directory lists and describes projects supported by grants and contracts issued by the Office of Special Education Programs in the Handicapped Children's Early Education Program (HCEEP). The first section describes the HCEEP network and results of a recent study evaluating the program's efficacy and impact. The second section summarizes the activities of the five types of HCEEP projects: demonstration projects (102); outreach projects (24); state plan grant projects (56); early childhood research institutes (4); and technical assistance centers (2). Project-written abstracts for each of the 188 projects are provided in the third section. Descriptions typically include the following information: address; telephone; fiscal agency; executive director; program director; characteristics of the target population; program for children; measures of child progress; program for parents; and features and products. A project list is included, showing all 188 projects and the page number of each project's abstract. An index provides a guide to pertinent project characteristics (such as handicapping conditions of children served, parent activities offered, curricula used, etc.). (CB)

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1985–86 Directory

Handicapped Children's Early Education Program

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Managing Editor: Marcia Decker
Data Analysis: Tanya Suarez, Diana Montgomery, Laura Caldwell
Production: Barbara Wagner, Paige McParland, Debbie Creamer
Cover Design: Marcia Decker
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Pascal L. Trohanis, TADS Director and Principal Investigator

Helene Corradino, Project Officer, Office of Special Education Programs, U.S. Department of Education

September 1986

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Preface

This document, produced by the Technical Assistance Development System (TADS) for the Office of Special Education Programs (OSEP) of the U.S. Department of Education, is a directory of projects supported by OSEP grants and contracts in the Handicapped Children's Early Education Program (HCEEP). This document also presents an overview of HCEEP's activities.

The *1985–86 HCEEP Directory* contains five sections:

- The **Introduction** describes the HCEEP network and the results of a recent evaluation study.
- The **Overview** section summarizes the activities of the five types of HCEEP projects: demonstration, outreach, and state plan grant projects; early childhood research institutes; and technical assistance centers.
- The **Directory** section contains project-written abstracts for each of the 188 HCEEP projects.
- The **Project List** shows all 188 projects and the page number of each project's abstract. These page numbers also represent the projects in the Index section.
- The **Index** provides a guide to projects' pertinent characteristics (handicapping conditions of children served, parent activities offered, curricula used, etc.).

The *1985–86 HCEEP Directory* outlines the national effort of the HCEEP network in a manageable format that can be used by persons directly or indirectly involved in that effort. Families may look to this document to find programs that can help their children. Service providers may use this document to collaborate with other professionals. Lawmakers, administrators, and other policy makers may refer to this document for a comprehensive up-to-date portrait of the diverse activities their decisions may affect. OSEP and TADS hope the *1985–1986 HCEEP Directory* will stimulate interest in the needs of America's young handicapped children and their families and further the aim of HCEEP—to create more and better services for all young handicapped children.

Introduction

Thomas E. Finch, Acting Branch Chief
Early Childhood Section
Office of Special Education Programs
U.S. Department of Education

The Handicapped Children's Early Education Program (HCEEP) was established 16 years ago with a mandate to set up model demonstration programs for the delivery of special education and related services to young handicapped children from birth through the third grade. In the congressional hearings that led to the passage of legislation establishing HCEEP, three major needs were identified for early intervention programs: the need for locally designed ways to serve infants, young children, and their families; the need for more specific information on effective programs and techniques; and the need for distribution of visible replicable models throughout the country.

Major assumptions in establishing HCEEP were (1) that only through early intervention with tested and successful program models would those concerned with assisting handicapped children be able to provide best services, and (2) that HCEEP should provide models of services rather than be a direct service delivery program. HCEEP was intended to provide an opportunity for any public or private nonprofit organization to develop and demonstrate high-quality services for a selected group of children and their families. It also was intended to provide an opportunity to demonstrate the effectiveness of locally designed approaches and disseminate those ideas across the nation to other agencies that might choose to use the model rather than develop their own program.

HCEEP began as a small program with 24 demonstration projects. It developed through the years into a major program with six separate, complementary components. HCEEP now funds 102 demonstration projects, 24 outreach projects, 56 State Plan Grant projects, four research institutes, and two technical assistance centers. The sixth and final component is the Preschool Incentive Grant program.

Public Law 98-199 has effected some changes within HCEEP. This "Amendment to the Education of the Handicapped Act" builds upon program development and model service delivery, and mandates state-level comprehensive service delivery systems. The law provides appropriate adjustments within HCEEP, especially the state grant component. Interagency, interdisciplinary collaborations and cooperation are emphasized, and a new grant program lends special support to states planning, developing, or implementing comprehensive service delivery systems.

Demonstration Projects

This year, 102 demonstration projects are sponsored by private nonprofit agencies and organizations, local schools, universities, and state educational agencies. These projects provide models for the delivery of education and related services to handicapped young children and their families. Demonstration project models address child identification and assessment, education/therapeutic programming for children, evaluation of child progress, active parent/family participation, in-service training, coordination with public schools and other agencies, evaluation of project activities, and demonstration and dissemination of project information.

Though wide geographic distribution of these demonstration projects has been emphasized throughout HCEEP's existence, the program has maintained its cohesiveness through HCEEP's growing emphasis on interagency and interproject collaboration and coordination. The networking afforded through funded projects and the technical assistance provided by the HCEEP technical assistance centers create a cohesive national program and help to develop professional knowledge and expertise.

Demonstration projects have proven their effectiveness. An early study indicated that approximately 80 percent of the demonstration projects (and programs that replicated the demonstration models) continued to operate in their respective communities after their federal funding ended. The study also showed that many children learned one and one-half to two times the educational skills they would have been expected to learn without project experiences. These findings indicate that many young children with handicaps are capable of making greater gains in the crucially important early years than previous prognoses had indicated.

Outreach Projects

The outreach component began in 1972 with two goals: (1) to promote and increase high-quality services to preschool handicapped children birth to age 8 years and their families, and (2) to stimulate replication of innovative models developed and refined during the HCEEP demonstration phase.

Outreach projects engage in the following six types of activities: awareness, product development and distribution, stimulating high-quality sites for service delivery, promoting state involvement, training, and other specific consultative assistance. Outreach projects may engage in one or more of these activities. All outreach projects, however, also must provide direct services to children and families. This component of their project must be supported by funds secured outside of HCEEP.

A variety of unique programs currently are operating. One project is serving as a resource to a state department of education to expand and improve services for infants and preschool handicapped children. Another project provides a transdisciplinary model of services, including quarterly assessments and family consultations, to handicapped and developmentally delayed infants birth to age 2 years. Other outreach projects provide for increased levels of services for the extended families of young handicapped children, with emphasis on increasing the involvement of fathers. Several other outreach projects focus on disseminating a model curriculum for the cognitive education of preschool handicapped children; providing therapeutic services for mild-to-moderately handicapped children; training in provision of mainstreaming options for young handicapped children; and providing appropriate services to children and families from diverse cultural backgrounds.

Originally, only HCEEP demonstration projects were eligible to apply for outreach funds. P.L. 98-199, however, allows other programs with similarly documented capabilities to apply for outreach funding.

Outreach efforts have been major contributors to the networking of effective programs for young children. Outreach program directors have demonstrated steady effort to build continuity and interagency/interstate collaborations, and to provide better training and services.

State Projects

The third component, state grants, was introduced in 1976. State implementation grants (SIG) were designed to help state educational agencies develop their capacity to plan for the development and expansion of early intervention services for handicapped children. SIGs helped states by making available trained personnel for needs and resources assessment and detailed planning with state-level coordination of services among agencies. SIGS were funded at various levels because of the wide diversity of state legislative mandates, appropriation levels, percentages of young children served, experience with preschool and early intervention, interagency coordinations, and resources.

In 1984–85, P.L. 98-199 instituted a new HCEEP state grant program, the State Plan

Grant, which is awarded to state educational agencies or other appropriate state agencies to plan, develop, and implement a comprehensive service delivery system for the provision of special education and related services to handicapped children birth to age 5 years. The State Plan Grant program has replaced the SIG program with the following three types of grants:

- In the **planning** phase, projects may be funded for a maximum of two years to conduct a needs assessment and develop procedures and designs for the development of a State Plan. At the conclusion of the two-year award, states are expected to delineate the service needs within the state for young handicapped children from birth and their families, describe the types of services which are available to serve this population, and, perhaps more importantly, determine the types of services which are needed, but are not available. Interagency agreements will have been negotiated or the procedures states are utilizing to complete these agreements will be described. The operational/procedural plan which states have developed will serve as a basis for the second phase of these grants.
- In the **development** phase, projects may be funded for a maximum of three years to demonstrate their design for a comprehensive State Plan and obtain approval from the state's board of education, commissioner of education, or other designated official of the appropriate state agency. States also will be expected to summarize established and maintained standards, including regulations, legislation, and policy for making services available for the birth-to-age-5 population; describe training activities for special educators and related personnel, including primary caregivers, at the state and local level; describe criteria established to evaluate effectiveness and impact of the proposed plan; and provide current demographic information on handicapped children birth to age 5 years.
- In the **implementation** phase, projects may be funded for a maximum of three years. An implementation phase grant is availabale to a state that has completed the development phase and obtained approval of its plan from an appropriate state agency. During this phase the pilot demonstrations begun under the development phase may be expanded to other portions of the state or territory.

P.L. 98-199 specifies that at least 30 percent of the appropriation for HCEEP is to be used for the State Plan Grant component. At least ten percent of this amount is to be used for technical assistance. This legislation recognizes the key role of states in providing education for their youngest citizens and provides an opportunity for states to sustain, for a maximum of eight years, an effort to build a program of comprehensive services that reaches all handicapped children birth to age 5 years.

This year, 56 states and territories are participating in State Plan Grant funding. Fifty-three of these projects are in the planning phase, and three are in the development phase.

Research Institutes

The fourth component, the early childhood research institutes, began as a joint effort between HCEEP and the U.S. Office of Special Education Programs, Research Projects Section. Currently, four institutes are funded by HCEEP to discover and disseminate information that can be used to improve services and programs for young exceptional children and their families.

Technical Assistance

Technical assistance (TA) is the fifth component of HCEEP. In 1971, the Technical Assistance Development System (TADS) was funded to help demonstration projects meet their objectives. TADS initiated procedures for the systematic delivery of TA and actively disseminated pertinent information to the HCEEP projects. TADS continues to provide TA to HCEEP demonstration and outreach projects. In 1984, a second TA effort, the State Technical Assistance Resource Team (START), was established to provide TA to HCEEP's State Plan Grant projects.

TADS and START are located at the Frank Porter Graham Child Development Center, University of North Carolina at Chapel Hill. These organizations address the needs and concerns of HCEEP projects by providing comprehensive program reviews, on-site consultations, small-group workshops, topical meetings, field visits, interagency and inter-project liaison, and publications on a variety of early childhood special education issues. The TA agencies have been, and continue to be, a major contribution to the overall development of the total HCEEP effort.

Incentive Grants

The sixth and final component is the incentive grant. This year HCEEP was given the additional responsibility for managing the Preschool Incentive Grant program. This is a state formula grant authorized under Section 619 of the Education of the Handicapped Act, Part B, to encourage state and local educational agencies to expand educational services to handicapped preschool children, birth to age 5 years. The formula grant to the state is based on the number of identified handicapped children age 3 to 5 years receiving special education and related services. The Education of the Handicapped Act Amendments of 1983 expanded the age range for services to birth to age 5 years.

State educational agencies may use funds received under this program to provide direct services, or they may contract with local education agencies, intermediate units, or other agencies to provide such services. Last year these funds were used in numerous ways, depending on state needs. States elected to use these funds to provide direct services to preschool handicapped children; to develop collaborative interagency agreements; to create statewide networks of technical assistance; to provide comprehensive diagnostic assessments; to develop parent training and counseling programs; to provide inservice training of administrative and ancillary personnel; and to support development of instructional television programs for teachers and support staff. Through the addition of the incentive grant program to HCEEP, the possibilities of developing a continuum of special education services at the state and local levels has been enhanced significantly.

Impact Data

The most extensive information on the impact of the HCEEP projects over the ten-year period from 1969 (when the first 24 projects were funded) through 1979–80 became available in 1982 with the completion of *Analysis of the Impact of HCEEP*, conducted by Roy Littlejohn Associates, Inc., under contract with the U.S. Department of Education. Surveys and site visits were used to obtain data on the impact of the 280 projects that had completed the three-year period of demonstration prior to 1981; some of these projects also carried out outreach activities in response to requests from other agencies.

The objectives of this impact study were:

- to determine the extent of:
  a) continuation of projects with non-HCEEP funds after the end of the three-year period of federal support for demonstration,
  b) replication of models developed by the program, and
  c) placement of children graduating from the projects;
- to analyze factors affecting each project's impact;
- to collect descriptive and analytical information on some of the exemplary projects having the greatest impact.

Almost all of the projects that met the criteria for inclusion in the study were reached through surveys or telephone contact. Twenty site visits were made to randomly selected projects to determine if the services reported in continuation and replication sites were fundamentally like the model described in the abstracts of the original demonstration projects. It was determined that they were.

The study found that the accomplishments of the HCEEP projects as shown by the survey results are greater and more varied than for any other documented education program, and that the program paid for itself many times over. Specifically, the study found that from 1969 to 1980:

- Eighty percent of the 280 projects continued to serve children – independent of HCEEP funding.
- More than 30,200 children were served in continuation projects at no cost to HCEEP.

- HCEEP projects stimulated 2,157 replications —1,991 by outreach projects and 166 by projects in the demonstration phase.
- For every programming dollar spent by HCEEP, $18.37 was generated for programming for children and their families.
- Replication programs served 107,850 children.
- For each child served directly by demonstration projects, 6.4 children received services through continuation of demonstration projects and through replication of projects.
- For each demonstration project, an average of 33 children per year were served with other funds.
- Projects were active in urban and rural areas in every state and in several U.S. territories, as specified by the legislation.
- Sixty-seven percent of the children who left HCEEP demonstration projects were placed in integrated settings with nonhandicapped children (less expensive than more specialized placements).
- Twenty-one HCEEP projects were approved for dissemination by the Joint Dissemination Review Panel of the U.S. Department of Education on the basis of evidence of effective programming and cost of replication. (Another HCEEP project received JDRP approval after the Littlejohn study was completed.)
- HCEEP projects developed and disseminated more than 3,000 print and audiovisual products; many products were purchased by commercial publishers.
- Extensive training was requested by, and provided to, personnel of other agencies.
- Many foreign countries adopted models developed by the HCEEP programs.

State and national impact of HCEEP programs has been both varied and extensive. For example, the SKI*Hi Project, located in Logan, Utah, illustrates the impact of HCEEP on other systems. This project, working with the Utah State Health Department, developed a statewide screening program for newborns. The collaboration resulted in a revised birth certificate format that includes high-risk indicators for hearing loss. Follow-up help through home visits is offered to every infant in the state who is found to be at risk for hearing impairment.

National impact is illustrated by the collaborative relationship of HCEEP and Head Start. Eight of the 16 Resource Access Projects (RAP) charged with locating appropriate special services for handicapped children within Head Start are current or former HCEEP projects. In 1982–83 the RAPs had a key role in enabling Heat Start to fill almost 55,000 of its enrollment slots with children with diagnosed handicaps.

Another HCEEP goal has been to develop new ways to diffuse proven practices at other locations desiring to use the results of prior work. The results of evaluations show that impact has successfully crossed state and regional lines: agencies wishing to receive information or assistance in introducing proven practices select and use models developed elsewhere in the country.

Efficacy Data

The data from the Littlejohn study complemented an earlier study carried out under a contract with the Battelle Institute of Columbus, Ohio. That study sought to assess children's progress, the status of graduates of the projects, parent participation, and replication of models by other agencies. In 1975, 129 randomly selected children in 19 projects were tested, and progress in the personal-social, motor, cognitive, and communication domains was assessed. Battelle's final report showed that within all handicapping conditions, children made one and one-half to two times the gains as would have been expected without the benefit of the project experiences. In some cases, as with educable mentally retarded children in the personal-social domain, the gains were even larger.

Battelle also evaluated parental satisfaction. Ninety-seven percent of parents perceived in their children positive changes or improvements which the parents attributed to the project.

The major goal of early childhood projects is to prepare children to enter regular classrooms whenever possible. The Battelle study looked at the placement of graduates and found that 74 percent of the children in the sample were placed in public school settings (64 percent in regular placement, with half of these receiving ancillary services).

The Joint Dissemination Review Panel (JDRP) of the U.S. Department of Education provides further evidence of HCEEP's effectiveness. Projects may apply for approval for dissemination by submitting evidence of effective programming for children and information on the cost of replication. JDRP thus far has approved for dissemination 22 projects developed with HCEEP funds.

Future Directions

Since its inception, HCEEP has fostered growth, development, and direction for parents, professionals, and caregivers involved with helping young handicapped children realize their potential. P.L. 98-199 places responsibility on states to develop a comprehensive system for the delivery of services to handicapped children birth to age 8 years. This may be accomplished through a compilation of knowledge and skills developed over the years, which is then organized into a comprehensive program.

This year grantees were encouraged to coordinate their projects with state early childhood coordinators to illustrate and provide appropriate rationale for funding their applications. Applicants were asked to describe the relationship of their proposed project to activities proposed within the State Plan Grant. Integration of services – cutting across disciplines and expanding the types of services available to young handicapped children – has been a strength of HCEEP grantees. Their efforts and the efforts of states illustrate that the mission of HCEEP, with its new directions toward a comprehensive service delivery program, will be attained.

Overview

The Overview presents and compares the activities of the five types of HCEEP projects (demonstration, outreach, State Plan Grants, research institutes, and technical assistance). Information used to prepare the Overview was collected from questionnaires mailed to projects in 1985-86.

Overview

Projects funded by the Handicapped Children's Early Education Program

The Handicapped Children's Early Education Program (HCEEP) leads a federal effort that fosters diverse and innovative approaches to the education of young handicapped children. HCEEP supports 188 grants and contracts throughout the United States and U.S. territories. Projects in the HCEEP network develop models of direct service for children and families, provide outreach activities, plan statewide programs, conduct research, or offer technical assistance. Figure 1 provides a concise diagram of the HCEEP network and its activities.

To show the range of activities of these projects, the Office of Special Education Programs (OSEP), U.S. Department of Education, contracted the Technical Assistance Development System (TADS) to prepare an overview of all projects funded during 1985–86. The national picture of the HCEEP network follows.

Figure 1

Handicapped Children's Early Education Program (1985–86)

Projects	Demonstration	Outreach	State Plan Grant	EC Institutes	Technical Assistance
Range of Activities	Development of exemplary models Services to children Services to parents Staff development Coordination with public schools and other agencies Demonstration, dissemination, and continuation	Stimulation of increased and high quality services Training Consultation State involvement and coordination Dissemination of information Product development and distribution Replication	Planning, development and implementation of early childhood state plans for comprehensive service delivery Assessment of needs, resources, policies and current services Interagency planning and agreements Evaluation	Long-term investigation of selected aspects of early education for handicapped children Research into direct application of early education programs in typical settings	Technical assistance to demonstration and outreach projects and State Plan Grant projects Assessment of needs Program planning Expert consultation Workshops Materials Evaluations Liaison and linkage
Eligible Parties	Public and private nonprofit agencies	Past demonstration grantees; others meeting criteria	State educational agencies or other appropriate state agencies in coordination with the SEA	Public and private nonprofit agencies	Public and private nonprofit agencies
Type of Funding	Grant	Grant	Grant	Contract	Contract/cooperative agreement
Funding Period	3 years Annual renewal	1 year Potential for renewal	Up to 8 years Annual renewal	5 years	Varies—1 to 3 years Annual renewal

Table 1

Demonstration: Handicapping Conditions and Ages of Children Served

Type of Handicap	Number of Handicapped Children Served by Age					
	0-11 months (26%)	12-35 months (36%)	36-71 months (35%)	over 71 months (3%)	Number of Children Served	Percent of All Children Served
At Risk	404	293	194	6	897	33
Speech-impaired	40	135	168	7	350	13
Orthopedically impaired	24	100	113	10	247	9
Trainable mentally retarded	18	101	95	10	224	8
Educable mentally retarded	42	58	87	22	209	8
Other health-impaired	59	64	44	12	179	7
Developmentally delayed	13	31	34	-	78	3
Seriously emotionally disturbed	1	12	57	6	76	3
Profoundly mentally retarded	24	44	3	3	74	3
Visually handicapped	17	44	11	-	72	3
Deaf/hearing-impaired	12	24	27	-	63	2
Specific learning disabilities	-	7	48	4	59	2
Autistic	-	10	29	-	39	1
Drug addicted	18	-	-	-	18	1
Deaf-blind	5	5	1	2	13	1
Other or Noncategorical	47	63	34	-	144	5
TOTAL	724	991	945	82	2742	100
Multihandicapped children*	102	246	235	27	610	22

Projects responding to survey question: N = 88

*These children also are reported according to primary handicap.

Table 2

Demonstration: Major Focus or Stress on Service to Ethnic/Cultural Minorities

Cultural Group	Number of Projects	Percent of All Demonstration Projects
Black	10	11
Hispanic	7	8
Indian	5	5
Asian	2	2
Alaskan Native	1	1
Other	2	2

Projects responding to survey question: N = 92

Table 3

Demonstration: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Demonstration Projects
Parent(s) and child	54	56
Child	25	26
Early childhood/other professionals	8	9
Mother/Primary caretaker	3	3
Both parents	3	3
Other	3	3

Projects responding to survey question: N = 96

Table 4

Demonstration: Parent/Family Activities

Type of Activity	Number of Projects	Percent of All Demonstration Projects
Parent/staff conferences	79	82
Identification of child needs	78	81
Identification of parental needs and learning goals	75	78
Participation on advisory board	72	75
Transition to next placement service	65	68
Advocacy	55	57
Formal communications (e.g., newsletters, telephone hot-lines, etc.)	54	56
Training to improve the way parents interact with their children	54	56
Training workshops	53	55
Classroom observation or teaching	46	48
Social groups	42	44
Counseling groups	41	43
Maintenance of child progress records	41	43
Development of instructional materials	34	35
Other noneducational or therapeutic services (e.g., job placement public assistance, medical services, etc.)	22	23
Parents training other parents	18	19
Therapy supervision	15	16
Provision of respite care	13	14
Fundraising	11	11
Formal support groups for siblings	7	7
Other	19	20

Projects responding to survey question: N = 96

Demonstration Projects

During 1985–86, 102 HCEEP demonstration projects have provided parents, communities, and professionals with innovative models for the early education of handicapped children. Twenty projects are in their first year of operation, 30 are in their second year, and 52 are in their third year. These projects are located in rural areas, inner cities, small towns, and suburban communities. The children served have diverse social, ethnic, and economic backgrounds, and exhibit a broad range of handicaps. Some projects concentrate on a particular handicapping or at-risk condition; other projects concentrate on factors such as age or cultural group, regardless of the handicap.

Table 1 shows a breakdown by age and primary handicap of children served by demonstration projects. Nearly two-thirds of the children are under age 3 years; 97 percent of the children are under age 6 years. Children at risk for handicaps—such as drug-addicted children, victims of child abuse, and children whose parents are mentally retarded—account for one-third of the children served. Projects report that 22 percent of the children have more than one handicap. (Table 1 also reports these multihandicapped children according to a primary handicap.) Some projects also serve nonhandicapped children as they participate in activities such as peer modeling and mainstream settings.

Some of the projects stress services to a particular ethnic group, citing most frequently Black or Hispanic populations as a particular focus of their services (see Table 2). Most of these projects have developed products and practices that incorporate ethnic customs and traditions or reflect expertise in serving minority populations.

Table 5

Demonstration: Fiscal Agencies

Type of Agency	Number of Projects	Percent of all Demonstration Projects
Institution of higher education (nonmedical)	32	33
Private, nonprofit organization	30	31
Institution of higher education (medical)	9	9
Local education agency (LEA)	9	9
Health institution (e.g., hospital or other nonuniversity medical facility)	6	6
Public agency (other than educational)	5	5
Regional or intermediate education agency	3	3
State education agency (SEA)	1	1
Other	1	1

Projects responding to survey question: N = 96

Part of the HCEEP philosophy is that families provide important first experiences for their infants and young children. Over half of the projects list the child and one or both parents as primary targets for direct services; 26 percent list only the child as the primary target (see Table 3). Some projects directly target neither the parents nor the child, and instead focus their models on health and education professionals. Secondary targets for intervention include siblings, fathers, extended family members, and early childhood professionals.

While targets for services vary, all of the projects offer some sort of parent or family participation. Table 4 indicates that parent/staff conferences, identification of child needs, identification of parental needs and learning goals, and parent participation on advisory boards are activities offered by almost all of the projects. Two-thirds of the projects involve parents in the transition of their child to the next educational placement; over half of the projects involve parents in advocacy, in training to improve parent/child interaction, in formal communication (newsletters, hotlines, etc.), and in training workshops. Most of the projects provide several parent or family activities.

Table 5 indicates the types of fiscal agencies that sponsor demonstration projects. The two most common sponsors are nonmedical institutions of higher education and private nonprofit organizations. Other projects are sponsored by medical institutions of higher education, local education agencies, and Indian tribes.

The environments in which projects deliver services to children vary (see Table 6). Half of the projects serve children in their natural environment—the home. The majority of these projects combine home intervention with outside services; only fifteen percent of the projects serve children exclusively in the home. Centers that are not located in public schools are the most common setting for intervention, followed closely by a combination of home and center settings that are not in public schools.

Table 6

Demonstration: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Demonstration Projects
Center (not public school)	24	25
Home and center (not public school)	21	22
Home	14	15
Public school	10	10
Home and public school	8	8
Home and health center	5	5
Hospital or health center	3	3
Other	12	12

Projects responding to survey question: N = 96

Certain settings make it possible for handicapped children to learn and play with nonhandicapped children. Integration experiences may involve special classes in regular schools, or they may involve handicapped and nonhandicapped children learning side by side. Table 7 shows that almost half of the projects provide some sort of integration experience for the children, and 60 percent of these projects fully integrate handicapped and nonhandicapped children in either regular or special settings. Since over half of all projects provide services in the home, some may have had difficulty describing their overall programs in terms of the integration statement choices provided in the survey. Aside from the projects listing "not appropriate," only six percent provide no integration opportunity for handicapped and nonhandicapped children.

Projects use a variety of curricular packages or approaches. The Index of this document lists curricula by name and indicates which projects use each package with over half of the children they serve. Some of the curricular packages were developed by the projects themselves and are available to be shared with other projects.

A variety of commercial and project-developed methods or devices help projects assess child progress for the purposes of planning instruction for the children and evaluating the programs. The Index lists these methods and devices by name and purpose and indicates which projects use each method; individual project abstracts in the Directory section describe administration schedules. Several projects have developed their own assessment devices, most of which are available to be shared with other projects.

Refer to the Index section and to project abstracts in the Directory section for more information about the 1985–86 demonstration projects.

Table 7

Demonstration: Integration Experiences

Types of Experiences	Number of Projects	Percent of All Demonstration Projects
Handicapped and nonhandicapped children are fully integrated in a regular early education setting	14	16
Handicapped children are integrated into a regular setting for some activities	13	15
Handicapped children are served in a special setting with nonhandicapped children fully integrated into that special setting	10	12
Handicapped and nonhandicapped children are not integrated	5	6
Handicapped children are served in a special setting with nonhandicapped children integrated into that special setting for some activities	3	6
Not appropriate to the project	30	35
Other	10	12

Projects responding to survey question: N = 96

Outreach Projects

The primary mission of outreach projects is to encourage replication of the service delivery model which the project developed, while continuing to provide some direct services to children. This year 24 projects are "reaching out" to communities across the nation. Outreach projects conduct activities in all 50 states, the District of Columbia, and the terrritories of Guam and the Northern Mariana Islands, and in cooperation with the Bureau of Indian Affairs. Nearly half of the outreach projects report activities in California and New York, and about two-fifths conduct activities in Minnesota, Tennessee, Texas, and Utah. The Index indicates the number of replication sites operating in each state or territory.

The primary targets of outreach replication activities are organizations and agencies concerned with early childhood education and health. Most of the outreach projects direct their efforts to local education agencies (LEAs) and state educational agencies (SEAs). Other common targets include local private/nonprofit agencies, regional education agencies, Head Start, universities, hospitals, and other HCEEP projects. Within these target organizations, teachers are the most common focus of outreach services, followed by administrators, paraprofessionals, and parents.

Outreach activities are varied. Table 8 shows the amount of time project staff members devote to particular replication activities. All of the outreach projects provide training. Projects also attempt to stimulate adoption of their demonstration model at other sites, promote public awareness of outreach activities, and stimulate state involvement. Most outreach projects spend some time on each activity listed in Table 8.

Table 8

Outreach: Staff Time Spent in Outreach Activities

Activities	Number of Projects by Proportion of Staff Time				Number of Projects Engaging in Activity	Percent of All Outreach Projects Engaging in Activity
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
Training	6	14	4	-	24	100
Stimulating sites	17	3	2	1	23	96
Product development and dissemination	16	6	-	1	23	96
Promoting awareness	23	-	-	-	23	96
Stimulating state involvement	21	-	1	-	22	92
Other consultation activities	17	1	-	-	18	75
Other	9	-	-	-	9	38

Projects responding to survey question: N = 24

Table 9

Outreach: Materials Developed and Available to Share

Types of Material	Number of Projects	Percent of All Outreach Projects
In-service training or staff development materials	22	92
General Awareness materials	19	79
Parent education materials	16	67
Curricula for children	15	63
Program management/evaluation materials	13	54
Observation checklists	12	50
Bibliographies/reference materials	11	46
Curricula for parents	10	42
Assessment instruments for planning instruction (0-3)	10	42
Teacher competencies or needs assessments	9	38
Assessment instruments for planning instruction (3-8)	8	33
Child progress assessment instruments (0-3)	7	29
Child progress assessment instruments (3-8)	6	25
Product Development Guides	4	17
Child screening instruments (1-3)	2	8
Child screening instruments (3-8)	2	8
Other product development	9	38

Projects responding to survey question: N = 24

Almost all of the projects develop and disseminate products such as publications, curricula, assessment devices, and audio-visual presentations. Products are designed for parents, teachers, administrators, health professionals, and the general public. Table 9 reveals the productivity of outreach projects and the variety of materials available within the HCEEP network. Refer to the Index and Directory sections for specific products available from individual outreach projects.

Cooperative and collaborative activities between outreach projects and state-level agencies continue to grow in importance. Table 10 shows

Table 10

Outreach: Collaborative Activities with State-Level Agencies

Activities	Number of Projects	Percent of All Outreach Projects
Identification of potential replication sites	22	92
Awareness workshops regarding one or more outreach models or services	20	83
State level committees/task forces/advisory councils	17	71
Development of program standards and/or "best practice" recommendations for the state	11	46
Proposal writing	9	38
Identification of needs for legislation	9	38
Development and/or support of specific legislative recommendations	9	38
Development of certification standards	7	29
Identification of services and service providers currently available in the state	7	29
Contributions to state agency newletters	5	21
Co-sponsor of public awareness conference(s)	4	17
Evaluation of state-funded programs	4	17
Joint development of print and audio-visual products	3	13
Other	4	17

Projects responding to survey question: N = 24

the variety of ways outreach projects work in collaboration with state early intervention efforts. Nearly all of the outreach projects confer with state agencies in identifying potential model replication sites, and most conduct workshops on outreach activities. Almost three-quarters of the outreach projects participate in state-level committees, task forces, and advisory councils. Other common collaborative activities include the development of standards and recommendations for state early intervention programs, advice and recommendations for state legislation, and identification of current services and service providers.

The transition from demonstration to outreach services involves a change in funding. Fiscal agencies that administer outreach and demonstration projects are similar (see Tables 5 and 11), but the funding strategies differ. Outreach projects receive HCEEP funds for replication efforts only, but OSEP still requires these projects to maintain some portion of the direct services to children which the projects provided in their demonstration phase. Outreach projects therefore must look to other sources to fund direct services to children and families. Table 12 shows sources of continuation funding secured by 1985–86 outreach projects. Noneducational public agencies and local education agencies (LEAs) are the most common funding sources. Note that private contributions, foundations, and nonprofit corporations provide only 25 percent or less of total funding for 13 projects. Only one of the HCEEP outreach projects receives 75 to 100 percent of its direct services funding from the private sector, although more than half of the projects report receiving 75 percent or more of their funds from a single source.

Characteristics of the service models of the outreach projects are similar to those of the demonstration projects. HCEEP's concern for parents and families is evident in the thrust of outreach projects' direct services; Table 13 indicates that 41 percent of the projects list family members as primary targets for direct services. Nearly half of the projects provide at least some services in the home (see Table 14).

Outreach projects have developed many of the curricular packages they use for direct services to children. In keeping with projects' responsibility to encourage replication of their models, most of these packages are available to share with

Table 11

Outreach: Fiscal Agencies

Type of Agency	Number of Projects	Percent of All Outreach Projects
Institution of higher education (nonmedical)	12	50
Private, nonprofit organization	7	29
Regional or intermediate education agency	2	8
Institution of higher education (medical)	1	4
Local education agency (LEA)	1	4
State education agency (SEA)	1	4

Projects responding to survey question: N = 24

other programs for children. The Index lists names of curricula developed or used by the projects.

Refer to the Index section and to outreach project abstracts in the Directory section for more information about the 1985–86 outreach projects.

State Plan Grants

With the passage of P.L. 98-199, amending the Education of the Handicapped Act, Congress created a new State Plan Grant program to supplant the former State Implementation Grant (SIG) program of HCEEP. The new State Plan Grant program reflects an increased emphasis on statewide interagency planning and coordination of services for early childhood. Under the new program, each state or territory is eligible for grant monies from OSEP to design and establish a comprehensive service delivery system (CSDS) for special education and related services to handicapped children, birth through age 5 years, and their families. This year 56 states and territories, including the District of Columbia, received State Plan Grant funding.

Table 12

Outreach: Source of Continuation Funding for Direct Services

Type of Source	Number of Projects by Proportion of Funding				Number of Projects Funded by Source	Percent of All Outreach Projects
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
Public agency (other than educational)	4	1	3	4	12	50
Local education agency (LEA)	1	1	5	4	11	46
Private, nonprofit organization	6	1	1	-	8	33
Private contributions	6	-	-	-	6	25
State education agency (SEA)	-	1	1	3	5	21
Institution of higher education	2	-	-	1	3	13
Federal education agency	2	1	-	-	3	13
Private foundation	1	-	-	1	2	8
Regional or intermediate education agency	1	-	-	1	2	8
Other	1	1	1	-	3	13

Projects responding to survey question: N = 24

Table 13

Outreach: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Outreach Projects *
Child	9	47
Parent(s) and Child	7	36
Other professionals	1	5
Father	1	5
Other	1	5

Projects responding to survey question: N = 19

*Percentages were calculated by rounding and may not add up to 100%.

Table 14

Outreach: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Outreach Projects*
Center (not public school)	6	32
Home and center (not public school)	4	21
Home and public school	4	21
Public school	2	10
Home	1	5
Other	2	10

Projects responding to survey question: N = 19

*Percentages were calculated by rounding and may not add up to 100%.

State Plan Grant activities are carried out in three phases:

- **Planning.** The state assesses current services, identifies gaps and overlaps, and begins planning for future services.
- **Development.** The state finalizes and obtains approval for its service delivery plan. States also may pilot aspects of the CSDS during this phase.
- **Implementation.** The state carries through with implementation and evaluation of the CSDS.

Although these phases function as a sequence, a state may enter the sequence at the phase which best suits its needs. Figure 2 lists states receiving grant monies and indicates grant phase and year of operation during 1985–86.

Almost all of the State Plan grantees have established planning groups for the CSDS, representing public and private agencies, parents, health professionals, legislators, advocacy groups, and others concerned with services for young handicapped and at-risk children. About half of the state grantees have prepared written mission statements for their CSDS, and slightly more than half have descriptions of the composition, roles, and responsibilities of the planning group available to share with other projects. These projects are identified in the Index section.

The major components of a state's CSDS include the following:

- a statewide system for identifying and locating handicapped and at-risk children;
- comprehensive and ongoing assessment procedures;

Figure 2

State Grants: Phase and Year of Operation

Year of operation indicated by (1) for first year and (2) for second year

Phase	State/Territory	
Planning	Alabama (2)	Nebraska (2)
	Alaska (2)	Nevada (2)
	American Samoa (2)	New Hampshire (1)
	Arizona (1)	New Jersey (1)
	Arkansas (2)	New Mexico (1)
	California (1)	New York (1)
	Colorado (1)	North Carolina (1)
	Connecticut (1)	Northern Mariana Islands (2)
	Delaware (1)	Ohio (2)
	District of Columbia (2)	Oklahoma (2)
	Florida (1)	Oregon (2)
	Georgia (1)	Pennsylvania (2)
	Guam (1)	Rhode Island (2)
	Hawaii (1)	South Carolina (2)
	Idaho (2)	South Dakota (1)
	Illinois (2)	Tennessee (1)
	Indiana (2)	Texas (2)
	Iowa (1)	Trust Territories of the Pacific (1)
	Kentucky (2)	Utah (2)
	Louisiana (1)	Vermont (2)
	Maine (1)	Virgin Islands (1)
	Massachusetts (2)	Virginia (2)
	Michigan (1)	Washington (1)
	Minnesota (2)	West Virginia (1)
	Mississippi (2)	Wisconsin (1)
	Missouri (2)	Wyoming (1)
	Montana (1)	
Development	Kansas (2)	
	Maryland (1)	
	North Dakota (1)	

- special education and related services appropriate to the individual child's developmental level and handicapping condition;
- a continuum of placement options to meet the individual child's needs;
- parental involvement in planning, development and implementation of services for their handicapped child;
- personnel development and training;
- interagency coordination among educational, health, social services, and other agencies;
- information dissemination about services available to handicapped children;
- ongoing evaluation of services and service providers.

Other elements identified as important by state grantees include transition, confidentiality, due process, technical assistance, prevention activities, and transportation.

State Plan grantees are required under P.L. 98-199 to conduct a statewide needs assessment of the special education and related service needs of all handicapped children, birth through age 5 years, during the planning phase. Most of the

Table 15

State Grants: Components of State Needs Assessment

Component	Number of Projects	Percent of All State Plan Grant Projects
Services for handicapped children 0-5 (e.g., by age and handicap, geographic location, child find strategy, eligibility, intervention, etc.)	45	85
Demographics (e.g., projected number of children, children currently served, parent data, etc.)	44	83
Personnel (e.g., preservice training, certification/licensure, personnel currently in practice, etc.)	40	75
Parents (e.g., issues identified by parents, parent advocacy organizations, etc.)	36	68
Analysis of legislation (e.g., existing laws and/or regulations, desired legislation, assessment of contradictory policies, etc.)	31	58
Interagency structure (e.g., groups currently in existence, structures which cross agency boundaries, joint projects, etc.)	31	58
Analysis of agencies (e.g., organizational chart, funding level, data management system, etc.)	29	55
Other	6	11

Projects responding to survey question: N = 53

grantees report that these assessments are in progress; about half of the grantees have results that can be shared. Procedures for conducting a needs assessment include analysis of existing state and local data, questionnaires, interviews, and meetings and forums conducted at the local, regional and state levels.

Components of the needs assessment are listed in Table 15. These include demographic information, such as number of children currently served or requiring services; availability and characteristics of services, including child find strategies and eligibility requirements; personnel training and certification; existing laws and regulations; parents' concerns; organizational information about service agencies; and interagency structure.

Parental involvement in State Plan Grant activities is actively encouraged and takes a variety of forms. Parents serve on advisory and planning committees, assist in the needs assessment, and participate in public awareness and legislative advocacy activities (see Table 16).

The State Plan Grant program stresses coordination with other state and local planning efforts, to reduce costs and fragmentation or duplication of services at the local level. Coordination efforts involve such programs as Maternal and Child Health projects, Developmental Disabilities Planning Councils, Preschool Incentive Grants and other OSEP-funded grant programs, child find activities, the Child and Adolescent Service System Program (CASSP), Early Periodic Screening Diagnosis and Treatment (EPSDT), NCCIP Project 0-3, and Head Start.

Refer to the Index and to State Plan Grant project abstracts in the Directory section for more information about the 1985–86 State Plan Grant Program.

Early Childhood Research Institutes

Four early childhood research institutes (ECRI) have the mission to discover and disseminate knowledge that can be used to improve services and programs for exceptional young children and their families.

Table 16

State Grants: Parent Involvement

Type of Involvement	Number of Projects	Percent of All State Plan Grant Projects
Needs assessment	43	81
Developing the Early Childhood State Plan	40	75
Public awareness	36	68
Gaining approval of the plan	21	40
Advisory group	5	9
Other	7	13

Projects responding to survey questions: N = 53

- Carolina Institute for Research on Early Education of the Handicapped (CIREEH)
  University of North Carolina at Chapel Hill

  CIREEH researchers focus on the families of young moderately and severely handicapped children birth to age 5 years; develop and disseminate intervention materials for parents and professionals; train graduate students to conduct research in this area; and coordinate CIREEH's activities with those of other ECRIs.
- Early Childhood Research Institute
  University of Pittsburgh

  The major purpose of this ECRI is to develop procedures for assessing and teaching social and related skills to autistic-like preschool children, so these youngsters will be able to participate successfully in instructional settings with nonhandicapped or less handicapped children.
- Early Intervention Effectiveness Institute
  Utah State University, Logan

  The objective of this ECRI is to examine the effectiveness of early intervention programs for handicapped infants and preschoolers through 16 longitudinal studies, focusing on the efficacy of comprehensive intervention; the effects and costs of varying program components; and the effects and costs of intervention as related to age at onset of intervention.
- Early Intervention Research Institute
  Utah State University, Logan

  Major objectives of this ECRI are to examine previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus; to develop a model for cost-effectiveness analysis; and to conduct research to identify the most important problems and issues encountered in typical service settings.

For more information about the ECRIs, refer to the abstracts in the Directory section.

Technical Assistance

Helping handicapped and at-risk children and their families is a complex task, so the Office of Special Education Programs provides support to HCEEP projects through two technical assistance agencies. The term "technical assistance" refers to ongoing, systematic, and nonevaluative help.

The Technical Assistance Development System (TADS) has been serving as a technical assistance agency since 1971. Currently it serves HCEEP demonstration and outreach projects. The State Technical Assistance Resource Team (START) is in its second year of operation, serving HCEEP's State Plan Grant projects. TADS and START are programs of the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill.

TADS and START offer a broad range of support services that help HCEEP grantees manage programs and accomplish goals. Projects receive this responsive assistance through individual on-site consultations, small-group workshops, liaison and referral to other resources, large meetings, and an extensive publications program. TADS and START also arrange field visits between projects to promote collaboration and transfer of new practices, knowledge, and products.

Refer to the TADS and START abstracts in the Directory section for more information about these technical assistance agencies.

Project List

The Project List includes all 188 HCEEP projects funded during 1985–86. Projects appear on the list in groups according to their type of grant or contract (demonstration projects, outreach projects, state plan grant projects, research institutes, technical assistance centers). Within each group, projects are listed alphabetically according to state, city, and project name. The number assigned to each project indicates the page number of the project's abstract in the Directory section. These numbers also represent the projects in the Index.

Project List

Demonstration Projects

1. BIRMINGHAM, ALABAMA
   HOPE Preschool Program

2. HUNTSVILLE, ALABAMA
   Madison Area High Risk Project

3. ST. MICHAELS, ARIZONA
   Developmental Infant/Sensory-Motor Learning and Training Project

4. FRESNO, CALIFORNIA
   Child Care Options for Young Handicapped Children

5. LOS ANGELES, CALIFORNIA
   CHAMP

6. LOS ANGELES, CALIFORNIA
   Project PROTECT

7. MODESTO, CALIFORNIA
   Community A.C.T.

8. OAKLAND, CALIFORNIA
   Special Family Support Program

9. POMONA, CALIFORNIA
   Neuro-Cognitive Re-education Program

10. SAN DIEGO, CALIFORNIA
    IINTACT

11. SAN DIEGO, CALIFORNIA
    Linkage: Infant Special Care Center and Project Hope

12. SAN FRANCISCO, CALIFORNIA
    ISIS

13. SAN FRANCISCO, CALIFORNIA
    PAVII

14. SAN FRANCISCO, CALIFORNIA
    Project STIP

15. DENVER, COLORADO
    KEEP SAFE

16. CHESHIRE, CONNECTICUT
    FIRST

17. WASHINGTON, D.C.
    AID

18. WASHINGTON, D.C.
    Project CIII

19. WASHINGTON, D.C.
    Parents and Preschoolers in Transition

20. WASHINGTON, D.C.
    Un Buen Comienzo/A Good Beginning

21. CLEARWATER, FLORIDA
    High School/Preschool Partnership Program

22. GAINESVILLE, FLORIDA
    STRETCH

23. ATHENS, GEORGIA
    Contingency Response Intervention for Infants of Adolescent Parents

24. HONOLULU, HAWAII
    Ho'opa Ola

25. MOSCOW, IDAHO
    Family Involvement with At Risk and Handicapped Infants

26. CHICAGO, ILLINOIS
    Chicago Intervention Project

27. CHICAGO, ILLINOIS
    LETS

28. MACOMB, ILLINOIS
    ACTT

29. BLOOMINGTON, INDIANA
    Indiana Network

30. WEST LAFAYETTE, INDIANA
NEIGHBORCARE

31. LAWRENCE, KANSAS
Planning School Transitions: Family and Professional Collaboration

32. PARSONS, KANSAS
PREP-EDD

33. TOPEKA, KANSAS
Project Kidlink

34. WINFIELD, KANSAS
INTERCHANGE

35. FRANKFORT, KENTUCKY
Direct and Indirect Service Delivery to Infants

36. LEXINGTON, KENTUCKY
STEPS

37. AUGUSTA, MAINE
Preventive Intervention Project

38. MACHIAS, MAINE
Washington County Children's Program

39. POWNAL, MAINE
RURAL

40. BRIGHTON, MASSACHUSETTS
PACT

41. CANTON, MASSACHUSETTS
Pathways for Children

42. JAMAICA PLAIN, MASSACHUSETTS
Infant-Toddler Demonstration Project

43. LUDLOW, MASSACHUSETTS
Identification and Remediation of an At-Risk Preschool Population

44. ANN ARBOR, MICHIGAN
Family Day Care Project

45. DETROIT, MICHIGAN
Detroit's Preschool Hearing-Impaired Support Center

46. WOODHAVEN, MICHIGAN
TRIP

47. EAGAN, MINNESOTA
Project Dakota

48. MOORHEAD, MINNESOTA
Clay County Coordinated Preschool Program

49. PHILADELPHIA, MISSISSIPPI
Language Development Model

50. KANSAS CITY, MISSOURI
PALS

51. BROWNING, MONTANA
Blackfeet Rural Early Education Model

52. MISSOULA, MONTANA
CO-TEACH

53. OMAHA, NEBRASKA
Early Referral and Follow-Up

54. OMAHA, NEBRASKA
Project Participate

55. RENO, NEVADA
PACEER

56. SPARKS, NEVADA
HAPPY

57. EDISON, NEW JERSEY
COPING

58. NEW BRUNSWICK, NEW JERSEY
Language Interaction Intervention Project

59. ALBUQUERQUE, NEW MEXICO
GAP

60. LOS ALAMOS, NEW MEXICO
A Continuum of Services in Rural Northern New Mexico

61. SANTA FE, NEW MEXICO
TIPS

62. BUFFALO, NEW YORK
Young Babies, Young Moms

63. CHEEKTOWAGA, NEW YORK
Special Friends and Computer Project

64. NEW YORK, NEW YORK
TIPS

65. NORTH MERRICK, NEW YORK
Project CHIME

66. SYRACUSE, NEW YORK
Creating Least Restrictive Options

67. CHARLOTTE, NORTH CAROLINA
Charlotte Circle Project

68. MORGANTON, NORTH CAROLINA
HAPPEN

69. MORGANTON, NORTH CAROLINA
SUNRISE

70. RALEIGH, NORTH CAROLINA
First Years Together

71. WILLIAMSTON, NORTH CAROLINA
VIPP Project

72. AKRON, OHIO
A Social Communicative Intervention Model

73. CANTON, OHIO
TEACH

74. CINCINNATI, OHIO
Project Access

75. COLUMBUS, OHIO
Remediating Social Deficits in Peer Interaction

76. EUGENE, OREGON
Model Early Intervention Program to Develop a Linked Evaluation-Programming System

77. MONMOUTH, OREGON
Project ENTRANS

78. ALLENTOWN, PENNSYLVANIA
HAPPY

79. EBENSBURG, PENNSYLVANIA
KIDS

80. PITTSBURGH, PENNSYLVANIA
PATT

81. PITTSBURGH, PENNSYLVANIA
PREP

82. SCRANTON, PENNSYLVANIA
Project Link for Neonates At Risk

83. COCKEVILLE, TENNESSEE
ETIPS

84. JOHNSON CITY, TENNESSEE
Southern Appalachian Early Intervention Program

85. NASHVILLE, TENNESSEE
Infant/Toddler Learning Project

86. NASHVILLE, TENNESSEE
Preschool Orientation and Mobility Project

87. EL PASO, TEXAS
Early Childhood Day Care Project

88. HOUSTON, TEXAS
Single Parent Project

89. LOGAN, UTAH
Functional Mainstreaming for Success

90. LOGAN, UTAH
HI TECH

91. LOGAN, UTAH
Preschool Transition Project

92. OGDEN, UTAH
SPCTRM

93. BURLINGTON, VERMONT
TEEM

94. FRANKLIN, VIRGINIA
Project Cope

95. RICHMOND, VIRGINIA
Parent-to-Parent Monitoring Project

96. WILLIAMSBURG, VIRGINIA
Bright Beginnings

97. SEATTLE, WASHINGTON
CAP Project

98. SEATTLE, WASHINGTON
Coordinated Service Delivery for Young Handicapped Children

99. CLARKSBURG, WEST VIRGINIA
PEPSI

100. HUNTINGTON, WEST VIRGINIA
Intensive Team Training

101. MILWAUKEE, WISCONSIN
SPICE

102. POWELL, WYOMING
Special Touch Preschool

Outreach Projects

103. JONESBORO, ARKANSAS
Focus Classroom Outreach

104. ATHENS, GEORGIA
Rutland Center Developmental Therapy Model

105. CHAMPAIGN, ILLINOIS
PEECH

106. CHAMPAIGN, ILLINOIS
RAPYHT

107. ROCKFORD, ILLINOIS
RHISE/Outreach

108. BRIGHTON, MASSACHUSETTS
OPTIMUS/Outreach

109. DEDHAM, MASSACHUSETTS
BEACON Outreach Program

110. ALBUQUERQUE, NEW MEXICO
AIM Outreach

111. NEW YORK, NEW YORK
FEED

112. YORKTOWN HEIGHTS, NEW YORK
A Regional Program for Preschool Handicapped Children

113. MONMOUTH, OREGON
Teaching Research Infant and Child Center Data-Based Classroom

114. READING, PENNSYLVANIA
Family Centered Resource Project

115. NASHVILLE, TENNESSEE
Cognitive Early Education Project

116. LUBBOCK, TEXAS
DEBT

117. LOGAN, UTAH
INSITE Outreach

118. LOGAN, UTAH
MAPPS

119. LOGAN, UTAH
Social Integration Outreach Project

120. HAMPTON, VIRGINIA
Hampton University Mainstreaming Outreach Services

121. LIGHTFOOT, VIRGINIA
CDR Outreach

122. SEATTLE, WASHINGTON
ECHI Outreach Project

123. SEATTLE, WASHINGTON
Fathers Program Outreach

124. SEATTLE, WASHINGTON
Model Preschool Outreach Project

125. SEATTLE, WASHINGTON
Northwest Center Child Development Project

126. PORTAGE, WISCONSIN
The Portage Project

State Plan Grants

127. MONTGOMERY, ALABAMA

128. ANCHORAGE, ALASKA

129. PAGO PAGO, AMERICAN SAMOA

130. PHOENIX, ARIZONA

131. LITTLE ROCK, ARKANSAS

132. SACRAMENTO, CALIFORNIA

133. DENVER, COLORADO

134. HARTFORD, CONNECTICUT

135. DOVER, DELAWARE

136. WASHINGTON, D.C.

137. TALLAHASSEE, FLORIDA

138. ATLANTA, GEORGIA

139. AGANA, GUAM

140. HONOLULU, HAWAII

141. BOISE, IDAHO

142. SPRINGFIELD, ILLINOIS

143. INDIANAPOLIS, INDIANA

144. DES MOINES, IOWA

145. TOPEKA, KANSAS

146. LEXINGTON, KENTUCKY

147. BATON ROUGE, LOUISIANA

148. AUGUSTA, MAINE

149. BALTIMORE, MARYLAND

150. NORTH READING, MASSACHUSETTS

151. LANSING, MICHIGAN

152. ST. PAUL, MINNESOTA

153. HATTIESBURG, MISSISSIPPI

154. JEFFERSON CITY, MISSOURI

155. BILLINGS, MONTANA

156. LINCOLN, NEBRASKA

157. CARSON CITY, NEVADA

158. CONCORD, NEW HAMPSHIRE

159. TRENTON, NEW JERSEY

160. SANTA FE, NEW MEXICO

161. ALBANY, NEW YORK

162. RALEIGH, NORTH CAROLINA

163. BISMARCK, NORTH DAKOTA

164. SAIPAN, NORTHERN MARIANA ISLANDS

165. WORTHINGTON, OHIO

166. OKLAHOMA CITY, OKLAHOMA

167. MONMOUTH, OREGON

168. HARRISBURG, PENNSYLVANIA

169. PROVIDENCE, RHODE ISLAND

170. COLUMBIA, SOUTH CAROLINA

171. PIERRE, SOUTH DAKOTA

172. NASHVILLE, TENNESSEE

173. AUSTIN, TEXAS

174. TRUST TERRITORIES OF THE PACIFIC

175. SALT LAKE CITY, UTAH

176. MONTPELIER, VERMONT

177. ST. THOMAS, VIRGIN ISLANDS

178. RICHMOND, VIRGINIA

179. OLYMPIA, WASHINGTON

180. CHARLESTON, WEST VIRGINIA

181. MADISON, WISCONSIN

182. LARAMIE, WYOMING

Research Institutes

183. CHAPEL HILL, NORTH CAROLINA
CIREEH

184. PITTSBURGH, PENNSYLVANIA
Early Childhood Research Institute

185. LOGAN, UTAH
Early Intervention Effectiveness Institute

186. LOGAN, UTAH
Early Intervention Research Institute

Technical Assistance

187. CHAPEL HILL, NORTH CAROLINA
START

188. CHAPEL HILL, NORTH CAROLINA
TADS

Directory

The Directory contains abstracts for all 188 HCEEP projects and is based on information supplied by the projects. The projects are listed in groups according to their type of grant or contract (demonstration projects, outreach projects, state plan grant projects, research institutes, technical assistance centers). Within each group, projects are listed alphabetically according to state, city, and project name.

HOPE Preschool Program

Helping Others through Parent Education

ADDRESS: 215 21st Avenue, South
Birmingham, Alabama 35205

PHONE: (205) 322-8809

YEAR OF FUNDING: 1

FISCAL AGENCY: Association for Retarded Citizens, Inc., of Jefferson County

DIRECTOR: Bill Hoehle
COORDINATOR: Mary Butler
OTHER STAFF TITLES: speech pathologist, pediatric nurse, daycare instructor, special educators, home teaching specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 100 children birth to age five years. Children with any type of handicapping condition are eligible for service.

PROGRAM FOR CHILDREN:

The project offers three delivery modes. The daycare program primarily serves nonhandicapped children, as well as some mild to severely handicapped children. The home is the second service environment. Under this plan, home therapists make home visits weekly to work with the child and train the parents. The in-center program consists of highly specialized self-contained services conducted on-site with participation by parents encouraged. Children in the daycare program are eligible for these services.

MEASURES OF CHILD PROGRESS:

Each child is evaluated at entry and after one year in the program, using the Learning Accomplishment Profile (LAP). A single-subject research design also is employed when appropriate to demonstrate progress. Consumer surveys assess parent satisfaction with programming for their child.

PROGRAM FOR PARENTS:

Parents participate in the development of their child's individualized education plan. If possible, the parent is trained to work with the child at home. The daycare option is considered for two-parent families where one or both parents work and in single-parent households where the caretaker works. Parents of children enrolled in the center-based program are encouraged to attend at least one out of every four sessions.

FEATURES AND PRODUCTS:

The project provides a continuum of service delivery options to meet the needs of the child and family. The State Association for Retarded Citizens network and a regional consortium of service providers will disseminate results and encourage policy changes in the preschool area.

2 DEMONSTRATION

Madison Area High Risk Project

ADDRESS: Madison County Association for Retarded Citizens, Inc.
P.O. Box 1063
Huntsville, Alabama 35807

PHONE: (205) 539-2266

YEAR OF FUNDING: 3

FISCAL AGENCY: Madison County Association for Retarded Citizens, Inc.

DIRECTOR: Susan J. Smith
OTHER STAFF TITLES: developmental specialists; occupational, physical, and speech therapists

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 to 40 children birth to age 3 years who are considered at risk for developmental delays and other handicapping conditions. Children are identified by the local neonatal intensive care unit and by other community agencies. Families live in a predominantly rural 13-county area.

PROGRAM FOR CHILDREN:

An eclectic program is provided with various curricula used to supplement the Hawaii Early Learning Profile (HELP). All children receive home therapy and attend a small group class on alternate weeks. Children also receive speech/language therapy and physical/occupational therapy as needed.

MEASURES OF CHILD PROGRESS:

Child progress is documented by six-month evaluations of the extent to which each child attains the objectives specified in the child's individual education plan. Developmental assessments include the Bayley Scales of Infant Development and the HELP.

PROGRAM FOR PARENTS:

Home visits with the parents are a major part of the intervention services. Parents are taught specific techniques for interacting with and teaching their children. The project's director has primary responsibility for helping parents understand and cope with their child's handicapping condition.

FEATURES AND PRODUCTS:

Products to be developed include a bibliography of related materials in area libraries, a glossary of terms used in the project and in medical reports, and a project manual.

Developmental Infant/Sensory-Motor Project

ADDRESS: St. Michaels Association
for Special Education
P.O. Drawer H
St. Michaels, Arizona 86511

PHONE: (602) 871-4871

YEAR OF FUNDING: 1

FISCAL AGENCY: St. Michaels Association for Special Education

DIRECTOR: Velma Spencer
OTHER STAFF TITLES: physical therapist, speech therapist, occupational therapist, parent trainees/teacher aides, child development specialists, resource facilitators

CHARACTERISTICS OF TARGET POPULATION:

The project serves Navajo Indian children birth to age five years on the Navajo Reservation who have congenital and genetic disorders, as well as postnatal disease residuals, encephalitis, and meningitis. High priority is given to nonorganic failure to thrive and to neglected or abused infants. 26 children are served in two programs: Infant Development (birth to age two and one-half years) and sensory motor (age two and one-half to five years).

PROGRAM FOR CHILDREN:

Upon intake, each child is assigned to a multidisciplinary supporting team. Following assessment, the child may be routed in one of three directions: 1) the child may be served by the referring agency; 2) the child may be enrolled in the project's brief treatment program; or 3) the child may be enrolled in the project's intensive treatment program. In the brief treatment program, the child and/or family may receive crisis intervention, intense developmental guidance, or parent training over a three- to four-month period. In the intensive treatment program, the child attends a center-based program that uses the Education for Multihandicapped Infants (EMI) curriculum and addresses all areas of development for three to four months. Nonhandicapped infants spend a portion of the day in the program to serve as models. After intervention, infants in the projects are either mainstreamed into the regular school system or phased into other project classes.

MEASURES OF CHILD PROGRESS:

The project uses pre- and post-intervention administrations of the Bayley Scales of Infant Development, Denver Developmental Screening Test, and/or Hawaii Early Learning Profile (HELP). Short-term goals determined after assessment are listed on a needs-oriented record. Needs are recorded in behavioral terms and progress is monitored regularly.

PROGRAM FOR PARENTS:

Parents may participate in a training program dealing with such topics as child development, observation techniques, and intervention skills. Videotapes are used extensively during training. The extended Navajo family clan system plays a vital role in the welfare and well-being of the child.

FEATURES AND PRODUCTS:

The program incorporates traditional customs and native healing ceremonies of the Navajo culture as well as utilizing modern medical practices.

Child Care Options for Young Handicapped Children

ADDRESS: 841 North Fulton Avenue
Fresno, California 93728

PHONE: (209) 264-0200

YEAR OF FUNDING: 1

FISCAL AGENCY: Central Valley Children's Services Network

DIRECTOR: Marianne O'Hare
COORDINATOR: Cathy Flynn
OTHER STAFF TITLES: resource coordinator, nutrition coordinator, family child-care coordinator, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children with all types of handicaps. Approximately 40 children age six weeks to six years are mainstreamed. To be admitted into the program, the child must be able to benefit from mainstreamed group care and must require care that can be delivered in the mainstreamed setting.

PROGRAM FOR CHILDREN:

The aim of the project is to increase the number of facilities that can provide quality care for young handicapped children. For this reason, the project does not serve children directly, but rather focuses on training caretakers. The training program for daycare center staff and family daycare mothers takes place over a ten-week period. Weekly sessions cover topics such as mainstreaming, community services, nutrition, how children learn, and information related to specific handicaps. Staff members provide on-site visits. When necessary, project staff contact existing agencies and secure specialized equipment for daycare homes or centers, and see that the dietary needs of the child are supplemented in eligible daycare programs.

MEASURES OF CHILD PROGRESS:

The project maintains records which include observations of the child's behavior, results of the Developmental Screening Questionnaire, diagnostic and evaluative information from agencies, information from parent interviews, individualized education plans, and recommendations for the child. Project staff observe the child bimonthly to assess the child's progress in language and in emotional, social, and physical development.

PROGRAM FOR PARENTS:

The project offers seminars in child care for the parents of young handicapped children in cooperation with an existing service. Topics covered include issues related to caring for a special needs child; information on specific handicaps, home management problems and routines; cooperation and transitions between child care and home; use of community resources; and transition into public school. The project also organizes parent support groups.

FEATURES AND PRODUCTS:

The project director maintains records on the types of handicapping conditions for which care is requested.

CHAMP

Children in Hospitals: A Model Program

ADDRESS: UCLA Department of Pediatrics
Center for Health Sciences
University of California
Los Angeles, California 90024

PHONE: (213) 206-8750

YEAR OF FUNDING: 2

FISCAL AGENCY: University of California

PRINCIPAL INVESTIGATOR: Arthur H. Parmalee and Judy Howard
PROJECT DIRECTOR: Nancy Brill
OTHER STAFF TITLES: child development specialists, educational specialists, evaluator

CHARACTERISTICS OF TARGET POPULATION:

The program serves hospitalized chronically ill children birth to age 5 years and their parents. Children have leukemia, solid tumors, nonfunctional gastrointestinal systems (and must be fed intravenously), or end stage renal or kidney disease, or have undergone vascular or cardiac surgery. More than 30 families have participated in the program.

PROGRAM FOR CHILDREN:

The project helps hospitalized chronically ill young children develop healthy interactions with their parents and optimal cognitive and emotional growth. An Individual Intervention Plan is designed for each child based on an assessment of the child and family's needs. Each child participates in play activities individually or in a playroom program. Parents and surrogate parents are assisted in providing consistent daily caretaking sensitive to the child's needs and play activities based on the child's developmental level. Interactions with peers are introduced to maintain socialization experiences.

MEASURES OF CHILD PROGRESS:

Child progress is measured every three months with medical examinations, observation of play skills, the Gesell Developmental Evaluation, behavioral ratings, and an assessment of "Functional Status."

PROGRAM FOR PARENTS:

Services for parents are designed to help parents gain confidence in planning for their children's total needs. Specific therapeutic interventions are made to make aspects of caregiving more satisfying. Parents are interviewed to determine attitudes toward illness and concerns before, during, and after hospitalization. Interactions between mother and child are observed. A Parent Satisfaction questionnaire is administered post hospitalization. Parenting stress and impact of the illness on the family are also being assessed. A parents' group meets twice weekly to help parents deal with stresses associated with hospitalization.

FEATURES AND PRODUCTS:

The project is developing a curriculum for hospital staff working with chronically ill children and their families. Educational seminars are held for house staff and materials are being developed for use with other hospitals and community agencies.

Project PROTECT

ADDRESS: UCLA Intervention Program
1000 Veteran Avenue, Room 23-10
Los Angeles, California 90024

PHONE: (213) 825-0789

YEAR OF FUNDING: 1

FISCAL AGENCY: University of California at Los Angeles

DIRECTOR: Vickie Kropenske
OTHER STAFF TITLES: infant development specialist, clinical social worker, foster parent associate, public health nurse

CHARACTERISTICS OF TARGET POPULATION:

Approximately 20 to 25 infants who have been exposed prenatally to drugs are served prenatally and during the first 18 months of life. The project addresses needs of the infant, biological parents, foster parents, and staff.

PROGRAM FOR CHILDREN:

Infants identified during the prenatal period receive intervention through their mothers to promote a healthy delivery by improving the nutrition of the mother and supporting her as she resists further drug use. During the newborn period, a pediatrician and infant development specialist assess the infant's status medically, behaviorially, and nutritionally. From these assessments, project staff develop an intervention plan to provide a stable environment with modification of the amount of stimuli and with carefully paced introduction of appropriate cognitive and social experiences. Home visits by the infant development specialist provide the core of the intervention for the infant. When the infant reaches age 18 months, project staff, with the biological and/or foster parents, assist in the infant's transition into community program(s).

MEASURES OF CHILD PROGRESS:

Project staff administer the Gesell Developmental Kit to provide an ongoing assessment of the child's developmental status and the Bayley Scales of Infant Development to measure the infant's irritability, persistence, attention, and socializability. The child's medical status is assessed using the Pediatric Complications Scale. Other assessment measures include the Early Coping Inventory, Patterns of Attachment, and a play measure developed by Howard and Largo.

PROGRAM FOR PARENTS:

Intervention with the biological parent(s) focuses on individual needs of the substance abusing parent(s) through counseling. Project staff assist the parent(s) in developing an understanding of the medical, developmental, and environmental needs of the infant. Supportive services begin during pregnancy and continue for the 18-month period following the infant's birth. When an infant exposed prenatally to drugs is placed in foster care, the supportive services of a foster parent associate and the educational services of the infant development specialist are provided for the foster parent(s).

FEATURES AND PRODUCTS:

Special features include prenatal identification of the at-risk child; the use of foster parent associates; coordination of simultaneous services to biologic and foster families; and development of a computer software program to maintain continuity of information for the prenatally drug-exposed infant.

Community A.C.T.

Agencies Cooperating Together

ADDRESS: 801 County Center Three
Modesto, California 95355

PHONE: (209) 571-5108

YEAR OF FUNDING: 1

FISCAL AGENCY: Stanislaus County Department of Education

DIRECTOR: Doug MacDougal
OTHER STAFF TITLES: early childhood specialists, parent facilitator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children birth to age six years who are at risk for full or partial fetal alcohol syndrome and their families. The project makes a special effort to consider the differing needs of three family groups: chronic alcoholics, teenage parents, and migrant families.

PROGRAM FOR CHILDREN:

The project operates a vigorous screening effort. Children who appear to have fetal alcohol syndrome are assessed further in all areas of development, using standardized, criterion-referenced, and observational tools. Parents and project staff develop IEPs for children accepted into the program. Children and their parents are offered a wide range of services to facilitate their developmental growth, including home instruction; integration into regular education centers; speech, language, and physical therapy; support groups; and telephone consultation. Two instructional models are used: the Portage Guide to Early Education and the Individualized Critical Skills Model.

MEASURES OF CHILD PROGRESS:

Ongoing child progress is monitored through anecdotal records, formal observations, and quarterly completion of the Early Learning Accomplishment Profile (Early LAP) or Brigance Inventory of Early Development.

PROGRAM FOR PARENTS:

Services available to parents include one-to-one educational instruction during home visits, parent training, information sharing through monthly newsletters, counseling, and peer support groups. Parent newsletters deal with topics relevant to caring for a child with fetal alcohol syndrome. The project also carries out seven parent education sessions using the "Connections" modules.

FEATURES AND PRODUCTS:

The project will develop a set of pamphlets on topics such as multiagency identification procedures, parent/family support services, educational services, intervention considerations, parent newsletters, and evaluation considerations. It also plans to develop a slide presentation and video recording of parent perceptions of Community ACT's activities.

8 DEMONSTRATION

Special Family Support Program

ADDRESS: Child Development Center
Children's Hospital Medical Center
747 52nd Street
Oakland, California 94609

PHONE: (415) 655-9521

YEAR OF FUNDING: 3

FISCAL AGENCY: Children's Hospital Medical Center

CO-DIRECTOR (administrative): Nancy Sweet
CO-DIRECTOR (clinical): Rosamund Gardner
OTHER STAFF TITLES: parent/infant educational coordinator, clinical social worker, infant development specialists

CHARACTERISTICS OF TARGET POPULATION:

Services target handicapped and high-risk infants whose disturbed relationships with their parents limit the effectiveness of current family-oriented educational approaches. The project serves 14 infants and families who fall into one of the following categories: 1) handicapped infants in disturbed relationships with their parents; 2) premature infants less than 1500 grams or 32 weeks gestational age who are in disturbed relationships with their parents; 3) unserved populations of chronically ill infants; and 4) unserved babies at risk due to abuse, neglect, and other environmental factors.

PROGRAM FOR CHILDREN:

The project provides individual developmental programs which selectively combine a weekly home program, weekly group program activities (either special education or mainstream group), individual center-based educational sessions, in-hospital programs, and monthly multidisciplinary behavioral observations.

MEASURES OF CHILD PROGRESS:

Appropriate norm-referenced tests, primarily the Bayley Scales of Infant Development, are administered at entry to the program and at six-month intervals thereafter. Interaction between parent and child is assessed using videotapes of structured and unstructured interaction.

PROGRAM FOR PARENTS:

The program combines clinical support services with parent education and parent participation in the developmental program for the child. The program seeks to improve dysfunctional relationships between parent and child. Each individualized parent program selectively combines home- and center-based parent education, weekly parent support groups, infant and parent psychotherapy, marital and crisis counseling, in-home respite, and in-hospital support.

FEATURES AND PRODUCTS:

The project serves a "double-risk" population of handicapped and high-risk babies (developmental outcomes are also jeopardized by a dysfunctional relationship between parent and infant). The model integrates an infant developmental and educational program with clinical support for the parents and can be adapted by existing infant development programs for unserved or ineffectively served "double-risk" infants.

Neuro-Cognitive Re-education Program

ADDRESS: Children's Services Center
Casa Colina Hospital
255 East Bonita Avenue
Pomona, California 91767

PHONE: (714) 593-7521
Ext. 275

YEAR OF FUNDING: 3

FISCAL AGENCY: Children's Services Center, Casa Colina Hospital

DIRECTOR: Elizabeth M. Neumann
OTHER STAFF TITLES: tutor trainer, neuropsychological specialist, tutors, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age 3 to 8 years who have a diagnosed brain injury with a clearly identifiable cause.

PROGRAM FOR CHILDREN:

The project operates a combination home- and center-based tutorial program. The teacher/tutor works with the child in individual one- to four-hour sessions three to six times weekly using individualized instructional strategies. There are four steps in the child's educational process: 1) assessment, 2) program planning, 3) "basic" cognitive re-education, and 4) "transfer" cognitive re-education.

MEASURES FOR CHILD PROGRESS:

All children are given three tests: Kaufman Assessment Battery for Children (KABC), New Vineland Scales, and Brigance Inventory of Early Development and Basic Skills. These measures are administered four times yearly at program entry and at six, 12, and 18 months after entry. A test battery of neuro-cognitive measures is administered upon entry into the program. Computer-assisted instruction and measurement also are used.

PROGRAM FOR PARENTS:

Parents observe and participate in the home teaching sessions. Parents receive individualized training in using cognitive strategies and re-education methods. A self-help parent group has been formed.

FEATURES AND PRODUCTS:

The project has developed a neuropsychological assessment battery; an instructional manual for teachers and tutors, including instructional strategies for using "spared" abilities to overcome problems in attention, memory, and learning; and tutor and parent education procedures. A cross-over design evaluation model is used to determine effectiveness.

IO DEMONSTRATION

IINTACT

Infant Interagency Network Through Accessing Computer Technology

ADDRESS: San Diego State University
Suite 208, 6505 Alvarado Road
San Diego, California 92182

PHONE: (619) 286-2467

YEAR OF FUNDING: 3

FISCAL AGENCY: San Diego State University Foundation

DIRECTOR: Eleanor Lynch
OTHER STAFF TITLES: early childhood special educator, social worker, pediatric nurse practitioner, parent/community workers, secretary, programmer/computer systems analyst, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project, in cooperation with the San Diego Regional Center, the County Department of Health, and the Naval Hospital, serves three groups of children birth to age 3 years and their families. Children with any handicapping condition are eligible for services. The project places a special emphasis on children from diverse cultures.

PROGRAM FOR CHILDREN:

The project has developed a computerized directory of services (SearchLine) to facilitate referral and service delivery to young, high-risk, and handicapped children and their families. The project also provides direct, short-term assessment, educational intervention, and referral services to three groups of high-risk families: 1) parents with developmental delays, 2) disorganized, low-income, culturally and linguistically diverse families, and 3) adolescent parents. Staff members develop individual written programs and activities which can be carried out in the home by primary caretakers. Staff members teach caretakers to conduct the activities and monitor child progress through home visits, telephone contacts, and reassessment. Following exit from the program, staff members help find appropriate services for each child.

MEASURES OF CHILD PROGRESS:

Upon entry into the program, each child is assessed using the Early Intervention Developmental Profile. Children are reassessed every six months thereafter and at exit from the program. Staff members also maintain anecdotal progress records for each child.

PROGRAM FOR PARENTS:

The project views services to parents to be as important as services to children. A needs assessment identifies family needs in the areas of health, language, education, and social support. Project staff members help parents find services to meet identified needs. Families being served in one of the three groups receive weekly to biweekly home visits. Other families participate in workshops using the SEARCH curriculum developed by the project.

FEATURES AND PRODUCTS:

The project has developed SearchLine, a computerized directory of services for handicapped and high-risk children birth to age 5 years.

Linkage: Infant Special Care Center and Project Hope

ADDRESS: Infant Special Care Follow-Up Program
UCSD Medical Center
225 W. Dickinson
H814J
San Diego, California 92103

PHONE: (619) 294-5745

YEAR OF FUNDING: 3

FISCAL AGENCY: UCSD School of Medicine

CO-DIRECTORS: T. A. Merritt, Suzanne Dixon, and Virginia MacDonald
OTHER STAFF TITLES: nurse consultant, occupational therapist, education specialists, parent/infant educator, staffing coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 to 60 at-risk, preterm infants (birthweights less than 1500 grams) sustaining varying grades of intra-ventricular hemorrhage (IVH) soon after birth.

PROGRAM FOR CHILDREN:

Infants identified within the neonatal intensive care unit (NICU) receive sequential developmental assessment from nursery discharge through 12 months adjusted age. Infant education specialists help plan the infants' discharge from the NICU to the home. Infants receive follow-up services by teams of physicians, nurses, and education specialists, which plan and implement a developmental program for each infant and family. Infants receive periodic medical follow-up with physical, neurologic, vision, hearing, and neurosurgical evaluation.

MEASURES OF CHILD PROGRESS:

The project uses the Assessment of Premature Infants' Behavior Scale, the Dubowitz Neurodevelopmental Assessment, the Amiel-Tison First-Year Evaluation, and the Bayley Scales of Infant Development. Standardized assessments of occupational skills and audiologic and visual functions are performed. Developmental assessments in the special education program include the Minnesota Child Inventory, Stanford-Binet Intelligence Scale, California Preschool Social Competency Scale, and Education for Handicapped Infants.

PROGRAM FOR PARENTS:

Parents receive medical and social support and infant developmental counseling and training. Parents may attend peer and professional support groups. The parent acts as infant therapist under the direction of Project Hope. The project focuses on transition from medical follow-up to the special education program.

FEATURES AND PRODUCTS:

The project coordinates medical and special education services. A parent interaction curriculum; a pamphlet for parents on preterm infants, IVH, hydrocephalus, and neurosurgical therapies; and a text on the unique handicapping conditions of IVH among preterm infants will be developed. The project serves English- and Spanish-language families.

12 DEMONSTRATION

ISIS

Integrated Special Infant Services

ADDRESS: Department of Special Education
San Francisco State University
1600 Holloway Avenue
San Francisco, California 94132

PHONE: (415) 585-1026
469-1630

YEAR OF FUNDING: 3

FISCAL AGENCY: Frederic Burk Foundation for Education

DIRECTOR: Marci Hanson
ASSISTANT DIRECTOR: Mary Krentz
OTHER STAFF TITLES: special education teacher, physical therapist, language specialist, psychologist consultant, medical consultant, secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty children are selected from three groups of children with established or biological risks for handicapping conditions. The groups from which these children are drawn are: 1) children who test below 50 percent expected age level of development on a standardized infant development scale or who have an identifiable disabling condition; 2) severely handicapped infants and toddlers; and 3) infants who are at risk because of low birthweight, birth complications, or severe social-emotional difficulties.

PROGRAM FOR CHILDREN:

Handicapped and at-risk infants and toddlers and a limited number of non-handicapped infants and toddlers participate in the program. Services are delivered through a center- and home-based program. The center-based program is located in a public school. The project provides transdisciplinary services to the children in an integrated setting with the active involvement of the families.

MEASURES OF CHILD PROGRESS:

Children are assessed annually using the Bayley Scales of Infant Development, Uniform Performance Assessment System, and a project-developed, criterion-referenced checklist. Children's progress through instructional programs is assessed on a daily and weekly basis using trial-by-trial data collected by parents and teachers.

PROGRAM FOR PARENTS:

The project's goals for family involvement are to help parents enhance their children's development and to foster mutually satisfying interaction between parent and infant. Families are actively involved in instruction and receive guidance on "reading" their infants' signals, child development, and special education techniques. Clinical intervention services with the parent and child attempt to increase parents' understanding of their children's unique behavior patterns. Support services, optional classroom activities, and referrals to needed community services are available.

FEATURES AND PRODUCTS:

The project expects to produce a social cueing curriculum for parents, a manual detailing consortium-coordinated service delivery systems, and professional reports and presentations.

PAVII

Parents and Visually Impaired Infants

ADDRESS: 50 Oak Street
San Francisco, California 94102

PHONE:(415) 863-2250

YEAR OF FUNDING: 1

FISCAL AGENCY: Blind Babies Foundation

DIRECTOR: Deborah Chen
COORDINATOR: Clare Taylor Friedman
OTHER STAFF TITLES: parent-infant educator, administrative coordinator, liaison, home counselors, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 visually impaired children birth to age three years. Children vary in degree of visual impairment, as well as in additional physical, mental, or developmental disabilities.

PROGRAM FOR CHILDREN:

The project operates a home-based program offering weekly home visits by project staff to families of visually impaired infants and preschoolers. The social basis of learning and the parent's role as an interventionist are emphasized. The project is developing its own curriculum, the Socially Based Curriculum, which integrates intervention activities into daily home routines.

MEASURES OF CHILD PROGRESS:

Infant progress is monitored through pre- and post-testing and through periodic administration of observational and criterion-referenced tools. Instruments used include the Reynell-Zinkin Scales, the Maxfield-Buchholz Scale of Social Maturity, Oregon and Boston Developmental Scales for Young Visually Impaired Children, NCAST Teaching Scale, Bzoch-League Receptive Expressive Emergent Language Scale (REEL), and Carey Temperament Scales. Parent competencies are measured by pre- and post-tests and at quarterly intervals using the project-developed Parent Observation Protocol and the Dyadic Interaction Scale.

PROGRAM FOR PARENTS:

The parent program seeks to develop and promote parental observation and teaching skills, to promote parents' sense of competency through mutually satisfying interactions with the infant, and to increase parent responsiveness to infant behaviors. Parent training uses a "microteaching" approach involving videotapes and immediate feedback. Parents and children also participate in a weekly parent education/play class with sighted infants and their parents. The project offers a support/counseling group which is facilitated by the project psychologist.

FEATURES AND PRODUCTS:

The project will develop three assessment products: (1) the Parent Assessment of Needs, to identify target areas for intervention; (2) the Parent Observation Protocol, for use in the microteaching parent training modules; and (3) the Dyadic Interaction Scale for evaluating parent-infant interaction. The project also will make available the project-developed curriculum.

Project STIP

Supported Transition to Integrated Preschools

ADDRESS: Department of Special Education
San Francisco Unified School
241 Oneida Avenue, Room 80
San Francisco, California 94112

PHONE: (415) 586-6400

YEAR OF FUNDING: 1

FISCAL AGENCY: San Francisco Unified School District

DIRECTOR: Mary Frances Hanline
OTHER STAFF TITLES: integration specialist, transition specialist, parent consultant, educational consultants, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age three to five years who demonstrate "intensive special education and service needs," including mild to severe and multiple disabilities.

PROGRAM FOR CHILDREN:

The project provides comprehensive and coordinated services to families, children, and professionals during the child's transition from early intervention programs to model integrated preschool classes. Children enrolled in special education classes are integrated into existing child development and Head Start classes based on needs and abilities. Instruction in the integrated classrooms is provided in small groups in which nonhandicapped peers serve as models for the disabled children. The curriculum design emphasizes the teaching of developmental and functional skills in integrated settings.

MEASURES OF CHILD PROGRESS:

The project administers two criterion-referenced tests in a pre-test/post-test fashion. The instruments used are the Uniform Performance Assessment Scale and the Learning Accomplishment Profile (LAP). Daily and weekly data collection reflects child progress toward specified goals to be achieved in integrated classrooms.

PROGRAM FOR PARENTS:

Three parents serve on the advisory council. One parent is hired by the project to provide input to the project and assist with dissemination activities. Parents complete needs assessment surveys and complete follow-up questionnaires to assess the quality and impact of services. Based on the needs assessment, project staff create materials and a support network for parents as their children move from early intervention programs or from no early intervention into public school special education classes at age three years.

FEATURES AND PRODUCTS:

The project provides ongoing inservice training for regular classroom preschool teachers, through workshops, in-class training and support, and formative evaluation. Training emphasizes developing positive attitudes toward mainstreaming and competencies needed to teach in an integrated setting. The project will develop a curriculum for use in integrated preschool settings, focusing on effective integrated small group instruction. Multiple baselines will be conducted to validate that learning occurs in these small group instructional settings across all developmental areas.

KEEP SAFE

ADDRESS: Kempe National Center
1205 Oneida Street
Denver, Colorado 80220

PHONE: (303) 321-3963

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Colorado Health Science Center

SUPERVISING DIRECTOR: Ruth Kempe
DIRECTOR: Sari Sack Johan
COMMUNITY COORDINATOR: Jo Blum
OTHER STAFF TITLES: psychologist, bus driver and instructional assistant, speech pathologist, clerk-typist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 15 to 20 children age 3 to 6 years who have been physically or sexually abused and who are also developmentally delayed or at risk for developmental delays.

PROGRAM FOR CHILDREN:

The project addresses the social, emotional, and educational needs of the handicapped abused child through a continuum of services. The most severely handicapped children are enrolled in the Kempe Center's self-contained preschool, while the community-based program serves abused children within the local preschool, daycare center, or public school with weekly on-site visits. Services include family interactional analysis, standardized and play assessments, home and on-site visits, direct service in the classroom, and individual therapy. The INter-REActive Learning method (INREAL) is used in all settings within a psychoeducational therapeutic model. Children will be followed through the second grade.

MEASURES OF CHILD PROGRESS:

Ongoing evaluation of child progress includes developmental testing; developmental therapy checklists; videotape analysis of child/teacher, child/child, and child/caregiver interactions; daily logs; home visit reports; and regular monitoring of each child's and family's individual plan. A social/emotional evaluation will include the Child Apperception Test (C.A.T.), the Rating Scales of Mother-Child Interaction, and Harter's Self-Concept Scale.

PROGRAM FOR PARENTS:

A major feature of the parent component is the biweekly home visit, during which the home visitor establishes rapport, assesses family needs, and jointly establishes objectives for fostering appropriate parent/child interactions. Videotapes of parent/child interactions serve as a vehicle for parents to voice their emotional needs and work on their relationships with their child. Parents also may observe and participate in the classroom. A continuum of services, from individualized home visits to foster parent groups, is available to parents.

FEATURES AND PRODUCTS:

The project will produce a brochure, a checklist for recording and assessing play observations, a slide-show, a program to train teachers to serve the abused child within a variety of classroom settings, and an assessment process geared to the needs and characteristics of the abused child. Ongoing training and consultation is targeted for daycare and preschool staff in the community.

16 DEMONSTRATION

FIRST

Family Infant Resource Stimulation Team

ADDRESS: Darcy Elementary School
1686 Waterbury Road
Cheshire, Connecticut 06410

PHONE: (203) 272-3577

YEAR OF FUNDING: 3

FISCAL AGENCY: Cheshire Department of Education

DIRECTOR: Lois Rho
OTHER STAFF TITLES: teachers, psychologist, speech/language clinician, nurse, occupational therapist, secretary, financial secretary, video consultant, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project provides educational programming for 12 to 15 moderately to severely handicapped children and less intense support for 40 to 50 other children, birth to age 3 years. Children accepted into the program have a significant delay in two or more developmental areas, a serious trauma (such as a major illness), or inadequate parenting. The primary caretaker must be willing to participate in the program.

PROGRAM FOR CHILDREN:

The project provides a combined home- and center-based program with flexible scheduling. Children attend the center-based program one to three days weekly for one and one-half to two and one-half hours daily. Home visits (60 to 90 minutes) occur once or twice monthly to provide the parent with advice on how to arrange the home environment to foster development of the child. In the center-based program, the teacher and parent observe the child at play, develop hypotheses, intervene, and evaluate the impact of changes.

MEASURES OF CHILD PROGRESS:

Children's progress is measured using the Early Learning Accomplishment Profile, with each child serving as his or her own control. Qualitative records of child progress also are maintained.

PROGRAM FOR PARENTS:

Parents are involved in all aspects of the program, from the initial evaluation to exit. The program is intended to involve the whole family, including grandparents and siblings. Consultants and specialists are available to help parents as necessary. Parent progress is measured using a project-developed questionnaire. Responses of parents involved in the program are compared to the responses of parents not involved in the program.

FEATURES AND PRODUCTS:

The project manages a small resource center of books, pamphlets, periodicals, and toys related to young children. Project-developed products for professionals include booklets on curriculum planning for individual children in the project and a series of training videotapes. The project specializes in design of the environment for young children. A newly renovated birth-to-three center has been opened.

AID

Adolescent-Infant Development Program

ADDRESS: Department of Pediatrics and Child Health
Howard University Hospital
2041 Georgia Avenue, N.W.
Washington, D.C. 20060

PHONE: (202) 745-1596

YEAR OF FUNDING: 3

FISCAL AGENCY: Department of Pediatrics and Child Health

DIRECTOR: Eva T. Molnar
COORDINATOR: Roberta Johnson Clark
OTHER STAFF TITLES: administrative assistant/project secretary, parent educator/social worker, teacher/child development specialist, volunteers

CHARACTERISTICS OF TARGET POPULATION:

The project provides intensive services for 15 to 20 infants and toddlers birth to age 3 years whose parents are adolescents (age 19 years or younger). Mothers can be referred to Project AID based on medical criteria for medium to high risk of delivering a handicapped infant. AID also identifies and screens 250 adolescents each year.

PROGRAM FOR CHILDREN:

Individual education plans are developed based on assessment information. During the first year of life, the infant or toddler receives regular 30- to 60-minute enrichment sessions in the home. The child is evaluated yearly to determine progress and to update goals and objectives. Infants are often identified at the neonatal intensive care nursery, and intervention may begin there and continue in the home.

MEASURES OF CHILD PROGRESS:

Major assessment instruments used are the Brazelton Neonatal Behavioral Assessment, the Education for Multihandicapped Infants, and the Bayley Scales of Infant Development.

PROGRAM FOR PARENTS:

Parents are involved in all phases of the program. From the prenatal period through the delivery of the infant and the first three years of the infant's life, parents are instructed and assisted in the medical, educational, developmental, nutritional, and safety needs of their infants. Parents also are helped with their personal development and educational needs (help with school plans, information on job training, employment, day care).

FEATURES AND PRODUCTS:

The project serves adolescent parents before and after the birth of their child. The project has developed the Developmental Baby Kit and Manual; an instructional package on how to make the Baby Kit; Orientation Manual for Staff, Students and Volunteers; What This Pregnancy Means to Me: A Teenage Parent's Personal Perspective Diary Booklet; Getting to Know My Baby: A Teenage Parent's Experience Record Book; A Guide to the Development of Hospital-Based Early Infant Intervention Programs (slide/tape with manual); and Inventory of Adolescent Needs after the Birth of a Baby.

Project CIII

Chronically Ill Infant Intervention Program

ADDRESS: Georgetown University Hospital
Child Development
CG52 BLES Building
3800 Reservoir Road, NW
Washington, D.C. 20007

PHONE: (202) 625-2037

YEAR OF FUNDING: 1

FISCAL AGENCY: Georgetown University

DIRECTOR: Kathy Katz
COORDINATOR: Judith Pokorni
OTHER STAFF TITLES: physical therapist, nurse, infant education specialist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 16 infants who require prolonged (more than 10 weeks) care in the intensive care nursery (ICN) because of acute medical problems. Most of the infants served are premature and have prolonged needs for respiratory support or congenital anomalies requiring ongoing medical intervention.

PROGRAM FOR CHILDREN:

The project provides educational intervention for chronically ill infants beginning in the ICN and continuing until transition into community-based programs. During the infant's stay in the ICN, the project provides a comprehensive sensorimotor intervention program which is incorporated into the child's medical management plan. At discharge, the project nurse makes home visits and coordinates services of existing community resources. During the home component, direct services are provided using the Carolina Infant Curriculum. During the child's second and third years, the intervention program shifts to include a center-based component. In the event of rehospitalization, the infant receives developmental services in the hospital.

MEASURES OF CHILD PROGRESS:

Children are tested periodically to assess growth, neurological reflex development, cognitive development, motor functioning, and speech and language skills. Standardized developmental instruments are used to measure the effectiveness of the educational curriculum in promoting developmental progress. Tools used include the Brazelton Neonatal Behavior Assessment Scales, the Bayley Scales of Infant Development, assessment log for the Carolina Infant Curriculum, Bzoch-League Receptive-Expressive Emergent Language Scale, Learning Accomplishment Profile, and Vineland Adaptive Behavior Scale.

PROGRAM FOR PARENTS:

Prior to the child's discharge from the ICN, the project team works with the family to help prepare for transition to home care. The family receives training and support in managing health needs and in carrying out the educational program. Once a month, parents meet at the hospital for a parent group.

FEATURES AND PRODUCTS:

The project will develop a manual of intervention activities adapted for use with chronically ill infants, a slide-tape program illustrating intervention activities, and a replication workbook. The project also will sponsor a conference on serving chronically ill infants.

Parents and Preschoolers in Transition

ADDRESS: Easter Seal Society
2800 13th Street, N.W.
Washington, D.C. 20009

PHONE: (202) 232-2342

YEAR OF FUNDING: 1

FISCAL AGENCY: Easter Seal Society for Disabled Children and Adults, Inc.

DIRECTOR: Lee Walshe
COORDINATOR: Marcy Gringlas
OTHER STAFF TITLES: parent activities manager, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 54 preschoolers, age 2 to 4 years, and 80 parents. Among the children's handicapping conditions are cerebral palsy, Down's Syndrome, seizure disorders, muscular dystrophy, and orthopedic disabilities. Most of the children are severely multihandicapped. All of the children served are currently enrolled in a preschool program or in their first year of a special education public school placement.

PROGRAM FOR CHILDREN:

Project goals are to prevent the regression that typically occurs in children when they move from one program to another and to encourage progress in the new setting through follow-up activities. Project staff or the child's sending teacher/therapist visit the child's receiving school to provide orientation. Later, the child's sending teacher, therapist, or project coordinator observes the preschooler in his new environment and confers with the new teacher regarding the child's therapeutic and educational program. Upon request, the sending teacher/therapist may provide consultation or demonstration related to appropriate activities or resources for the child.

MEASURES OF CHILD PROGRESS:

The project measures success against an established index of anticipated achievement for severely/profoundly handicapped children. Both objective and subjective measures are used and include norm-referenced and criterion-referenced tools as well as teacher-made tests.

PROGRAM FOR PARENTS:

Parents going through the transition process with their child for the first time are linked with a parent "buddy" who has successfully navigated a transition experience. Buddy parents are available via telephone for support and consultation. The project oversees a training program for parents who serve in this role. Parents also are offered training in stress reduction, decision making, and appropriate procedures for transition and follow-up activities. Parents of children in the transition program are invited to give the project direction. Several parents serve on the advisory board.

FEATURES AND PRODUCTS:

An important feature of the project is cost reduction through the use of parent volunteers and released staff time. The development of a parent support program and the provision of comprehensive follow-up services are special project features. Proposed products include a viable listing of activities and administrative materials to facilitate replication of this transition and follow-up model.

20 DEMONSTRATION

Un Buen Comienzo/A Good Beginning

ADDRESS: Rosemount Center
2000 Rosemount Avenue
Washington, D.C. 20010

PHONE: (202) 265-9885

YEAR OF FUNDING: 2

FISCAL AGENCY: Rosemount Center

PRINCIPAL INVESTIGATOR
AND EXECUTIVE DIRECTOR: Jan Calderon Yocum
PROJECT DIRECTOR: Gail Solit
OTHER STAFF TITLES: infant/special educators, occupational therapist, speech pathologist, family liaison, teachers, assistant teachers, secretary, family home providers, substitutes

CHARACTERISTICS OF TARGET POPULATION:

The program serves 20 mildly to moderately handicapped infants and toddlers, mostly Hispanic, who have working parents and who would benefit from a mainstream bilingual and multicultural day-care setting. Project staff also train family home providers and day care staff to work with handicapped infants and toddlers.

PROGRAM FOR CHILDREN:

Comprehensive services are provided within the infants' regular care environments. A transdisciplinary team consults regularly with classroom teachers and family home providers. In-service training is offered for teachers and family home providers. The project uses the Individual Education Plan Planning Guide of Christ Church Child Center's Infant Program, the Hawaii Early Learning Profile, and multicultural and bilingual materials developed by Rosemount Center.

MEASURES OF CHILD PROGRESS:

Children in the day-care center and family day homes are screened using the Learning Accomplishment Profile, Early Learning Accomplishment Profile, Battelle Developmental Inventory, or Bangs and Dodson Birth-to-Three. Children's personal-social, adaptive, motor, communicative, and cognitive skills are assessed using the Bayley Scales of Infant Development, McCarthy Scales of Children's Abilities, Bzoch-League Receptive Expressive Emergent Language Scale, Bly Motor Behavior Assessment, and Preschool Language Scale (Spanish/English).

PROGRAM FOR PARENTS:

Parent services include daily written reports of child activities, weekly conversations with teachers, parent support groups, topical meetings, and three conferences yearly. Family assessment instruments include the Home Observation for Measurement for the Environment and bilingual materials developed by Rosemount Center.

FEATURES AND PRODUCTS:

Proposed products include two manuals on mainstreaming in day-care settings and an activity manual for day-care providers. Staff members are bilingual. All publications, staff training curricula, and children's activities will be prepared in English and Spanish.

High School/Preschool Partnership Program

ADDRESS: Countryside High School
3000 S. R. 580
Clearwater, Florida 33519

PHONE: (813) 797-3138

YEAR OF FUNDING: 3

FISCAL AGENCY: School Board of Pinellas County

PROJECT MANAGER: Janelle R. Johnson-Jenkins
OTHER STAFF TITLES: teacher (EC-H), teacher aide, clerk, consultant, speech therapist, occupational therapist, physical therapist, home economics (child care) teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves three populations: (a) ten mildly to moderately handicapped and 20 nonhandicapped children age 3 to 6 years; (b) high school students enrolled in a child care program who are interested in careers in child care, early childhood, special education, and allied fields; and (c) infants birth to age 3 years who need to be screened for possible disabilities. The handicapped children have physical, visual, and hearing impairments; speech and language disabilities; or mild to moderate retardation.

PROGRAM FOR CHILDREN:

The handicapped children are enrolled full-time in a district class for prekindergarten children with varying exceptionalities. They are fully mainstreamed with community preschoolers three mornings weekly. Each handicapped child has an individual education plan (IEP). The community toddler screening program is offered several times per year at no charge.

MEASURES OF CHILD PROGRESS:

Criterion-referenced norms from the ERIN Curriculum are used to conduct ongoing assessments of the preschool children. A diagnostic inventory is administered annually for each handicapped preschooler. The high school students are pre- and posttested each semester to ascertain changes in knowledge and attitudes; anecdotal records also are maintained. Records of participation and follow-up placement of all children and students are kept.

PROGRAM FOR PARENTS:

Parents help evaluate the program, develop IEPs for their children, and serve on the advisory committee. Bimonthly parent groups meetings are held throughout the county. Parents also are encouraged to volunteer in the classroom or observe.

FEATURES AND PRODUCTS:

The major features include a mainstreamed preschool setting; training and participation of high school students in the delivery of services to children; coordination of effort between vocational and exceptional student education; and interagency cooperation in infant screening. Products include the Infant-Toddler Screening Guide, Administrative Guide, and Curriculum Guide for the High School/Preschool Partnership Program. A slide/tape presentation of the program also is available.

22 DEMONSTRATION

STRETCH

Strategic Training for Rural Education Targeting Children who are Handicapped

ADDRESS: Project STRETCH
1005 S.E. 4th Avenue
Gainesville, Florida 32601

PHONE: (904) 375-7790
375-2997
YEAR OF FUNDING: 3

FISCAL AGENCY: Alachua County Association for Retarded Citizens

CO-DIRECTORS: Kimberly O. Fleming and Fern Gold
OTHER STAFF TITLES: child psychologist, child development specialists, occupational therapist, speech therapist, consultants, family therapists, administrative assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 5 years who live in rural Florida.

PROGRAM FOR CHILDREN:

Professionals see children on a weekly basis at home or at the center. Play activities are demonstrated to encourage positive interaction between parent and child. The project also tries to help parents learn to develop instructional objectives for their children, observe developmental milestones, and record daily progress. Parents and the child development specialist develop individual education plans (IEP) for the children.

MEASURES OF CHILD PROGRESS:

Children are assessed using the Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities. The Learning Accomplishment Profile (LAP), Learning Accomplishment Profile--Diagnostic Education (LAP-D), and Early Learning Accomplishment Profile are used to develop short-term objectives. The HOME is administered every six months. IEP short-term goals are charted in graph form each month.

PROGRAM FOR PARENTS:

Parents' needs are assessed when they enter the program, and goals are formulated. Parents also fill out the Parenting Stress Index (PSI) which reflects the level of stress they feel in 14 different domains. Parents are offered a variety of options which include individual instruction, family support meetings, small-group meetings, monthly parent meetings, involvement on the advisory council, Saturday morning workshops, toy-making workshops, and sibling meetings. An individual family plan is developed for each family based on parent needs, the PSI, the HOME, and observations.

FEATURES AND PRODUCTS:

The primary components of the program are family support, family training, and educational experiences for children. The project focuses on promoting positive relationships between the children and mothers, fathers, siblings, and extended family members. The staff psychologist works closely with families and professionals to promote understanding of the assessment. This link between assessment and intervention maximizes the children's development. A family therapist works with staff to develop family plans. The family therapist is available for direct intervention for families in crisis.

Contingency Response Intervention for Infants of Adolescent Parents

ADDRESS: Northeast Health District
Clarke County Board of Health
468 North Milledge Avenue
Athens, Georgia 30610

PHONE: (404) 542-8784

YEAR OF FUNDING: 2

FISCAL AGENCY: Clarke County Board of Health

DIRECTOR: Warren Umansky
COORDINATOR: Wendy Sanders
OTHER STAFF TITLES: project coordinator, family intervention specialist, programming specialist, model trainer, secretary, bookkeeper, neonatologist, nurse midwife

CHARACTERISTICS OF TARGET POPULATION:

The project serves potentially handicapped infants of adolescent mothers. Eligibility is determined on the basis of both biological risk factors and parent and family variables. Twenty infants and their families will be served. Children are served through their second birthday or until they are no longer considered at risk (based upon established criteria).

PROGRAM FOR CHILDREN:

Initial contact between the high-risk expectant parent and the family intervention specialist (FIS) takes place in the prenatal clinic. Within three days after the baby is born, the FIS visits the mother in the hospital; they discuss what to expect when the child is brought home and the importance of quality interactions between the mother and child. Home visits are made weekly for the first eight weeks, biweekly for the next 24 weeks, and monthly through the time the child reaches 24 months of age.

MEASURES OF CHILD PROGRESS:

Infant development is gauged using the Bayley Scales of Infant Development, which are administered at age 6, 12, 18, and 24 months at a Health Department High Risk Infant Follow-up Clinic. Changes in the quality of parent responses to infant cues over time are reflected in the NCAST Feeding and Teaching Scales administered in the home.

PROGRAM FOR PARENTS:

The project attempts to help families overcome environmental problems which may interfere with the child's well-being or development. Through a questionnaire, the FIS identifies the needs of the home and makes referrals to the appropriate agencies. During home visits, the FIS redirects the parents' most negative responses toward more positive alternatives. During in-home teaching sessions, the FIS interprets the baby's behaviors for the parent and models appropriate responses.

FEATURES AND PRODUCTS:

The project has a written manual and videotapes for use in training other agencies in the replication of the model. Discovery activities geared towards helping the young parent during the baby's first six weeks of life also are available. Parents are paid a stipend for participating. The project publishes Brief Reports, a quarterly that summarizes special characteristics of the project and outcome data.

24 DEMONSTRATION

Ho'opa Ola

A Program for Hearing Impaired Infants and Their Families

ADDRESS: Ho'opa Ola Project
1319 Punahou Street
Honolulu, Hawaii 96826

PHONE: (808) 947-8234

YEAR OF FUNDING: 2

FISCAL AGENCY: Communication Disorders Clinic, Kapiolani Women's and Children's Medical Center

DIRECTORS: Barbara Zeisloft and Setsu Furuno
COORDINATOR: Deborah Larkins
OTHER STAFF TITLES: audiologist, speech/language pathologist, social worker, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project will serve ten to 15 infants and their families who live on the island of Oahu. Children must be age 30 months or younger and have as their primary handicap hearing loss of sufficient degree to require amplification. Priority admission is given to children whose families are from minority cultural backgrounds and have a poor knowledge of English. A special effort is made to reach native Hawaiians and Filipino and Samoan immigrant families.

PROGRAM FOR CHILDREN:

The project has adapted the SKI*HI Curriculum to meet the linguistic and cultural needs of families of at least three ethnic backgrounds. The curriculum was adapted in order to be culturally relevant, taking into account cultural differences, such as child rearing practices, social customs, family structure, and attitudes toward physical handicaps. The project offers a flexible range of home- and clinic-based services.

MEASURES OF CHILD PROGRESS:

Each child is evaluated at intake, at quarterly intervals thereafter, and at discharge from the project. Communication and language skills are assessed using the SKI*HI Language Development Scale and spontaneous communication sampling. Auditory development and hearing aid needs are evaluated by procedures developed by the project. Data on the quality of parent-child interactions are gathered using the NCAST HOME and Teaching Scales.

PROGRAM FOR PARENTS:

Parents are trained in appropriate techniques and are encouraged to take the role of primary teachers of their children. According to individual needs, each family receives one to three hours of service weekly. Following a needs assessment, parents receive information in a language they understand on topics such as hearing loss, hearing testing, hearing aids and their use, normal sequence of auditory and language development, and auditory and language stimulation techniques.

Family Involvement with At Risk and Handicapped Infants

ADDRESS: Special Education Department
University of Idaho
Moscow, Idaho 83843

PHONE: (208) 885-6159
885-6772
YEAR OF FUNDING: 3

FISCAL AGENCY: University of Idaho

CO-DIRECTORS: Dale Gentry and Jennifer Olson
OTHER STAFF TITLES: center and home programmers, social worker, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves at-risk and handicapped infants birth to age 3 years and their families, regardless of the type or severity of handicap.

PROGRAM FOR CHILDREN:

Child and family needs are considered simultaneously in programming decisions. After family and child are assessed, objectives for the entire family unit are identified. Parents select from service options that include: 1) a home-based program of early intervention; 2) a mainstream center-based program for the infant; 3) a program that combines the home- and center-based options; 4) parent support activities; 5) infant/caregiver interaction training groups; and 6) instructional classes based on family needs. The curriculum for child intervention is based on the Systematic Instruction Model. Children work on sensory-motor, motor-communication, social, and self-care skills.

MEASURES OF CHILD PROGRESS:

The children are assessed using developmental scales. Data are collected daily on each of the target behaviors. At-risk infants are screened at birth and assigned to a monitoring status track or intervention. Infants birth to age 4 months are assessed on NCAST Scales and the PCIS; the Gesell Developmental Kit is given at age 8 and 24 months. Infants not receiving direct intervention are monitored at four-month intervals.

PROGRAM FOR PARENTS:

At entry, a family profile is obtained that includes a needs assessment, stress evaluation, assessment of coping strategies and family adaptability, and an analysis of family responsibilities and roles. Families and staff develop a Family Intervention Plan that incorporates the strengths and needs of all members. Families then select a series of goals which are consistent with their profile. Examples of family services are assistance with accessing resources, family counseling, support groups, Parent-to-Parent activities, parent education on infant intervention, and direct involvement with infant programming in the classroom and in the home.

FEATURES AND PRODUCTS:

The project has initiated a rural screening and referral process that emphasizes the cooperative relationship between the medical and educational communities. These activities are described in a manual, Locating and Serving the At-Risk Infant in Rural Settings. The Family Profile, describing intake procedures, family assessments, family intervention planning forms, and case study examples, can be obtained from the project. A project manual has been developed and is now available.

Chicago Intervention Project

ADDRESS: Institute for the Study of Developmental Disabilities
University of Illinois at Chicago
1640 W. Roosevelt Road
Chicago, Illinois 60608

PHONE: (312) 996-1567

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Illinois at Chicago

DIRECTORS: Arnold J. Sameroff and Richard P. Brinker
OTHER STAFF TITLES: special educator, occupational therapist, prespeech and feeding specialist, parent program coordinator, social worker, evaluator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 24 handicapped children under age 3 years and their families from economically disadvantaged minority populations. Referrals are primarily from hospital high-risk follow-up programs.

PROGRAM FOR CHILDREN:

Children attend a center-based program one morning weekly. Groups of six children and their mothers are served by a transdisciplinary team that provides therapeutic activities in a play context, focusing on gross-motor, fine-motor, language, social-emotional, and cognitive functioning. Interventions using videotape analyses attempt to improve interactions between parents and children.

MEASURES OF CHILD PROGRESS:

Children are assessed with the Bayley Scales of Infant Development, Uzgiris-Hunt Ordinal Scales of Psychological Development, Carolina Record of Infant Behavior, and the Chicago Infant Neuromotor Assessment at intake and at graduation. Systematic records are kept of goals and progress on childrens' individual education plans.

PROGRAM FOR PARENTS:

The parent is trained to be sensitive to the emotional and communication activities of the child while providing educational and motor therapy in a play context. Weekly support group meetings are provided for mothers; fathers and grandparents are integrated into the support group when they are active participants in child care. Parent evening meetings, a library for parents, and a toy library augment the weekly program; special activities are provided for teenage mothers. Mothers are assessed at entry and exit from the program on a child acceptance scale, an anxiety measure, social support systems measure, self-esteem measure, and a concepts of development scale.

FEATURES AND PRODUCTS

The project emphasizes parent participation in the developmental progress of the child. Materials available include a toy library and a resource library for parents.

LETS

Longitudinal Evaluation and Therapy Services

ADDRESS: David T. Siegel Institute
Michael Reese Hospital and Medical Center
3033 South Cottage Grove Avenue
Chicago, Illinois 60616

PHONE: (312) 791-2900

YEAR OF FUNDING: 3

FISCAL AGENCY: Michael Reese Hospital and Medical Center

DIRECTOR: Kathy Merrick
OTHER STAFF TITLES: teacher, social worker, audiologist, secretary, pediatric neurologist, speech pathologist, occupational therapist, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 18 infants who have multiple handicapping conditions that may delay the child's communication development (hearing loss, moderate or severe developmental delay, neurological or seizure disorders, cerebral palsy, mental retardation, chronic illness, visual impairments, or emotional disorders). Economically disadvantaged minority infants are of special concern to the project.

PROGRAM FOR CHILDREN:

An interdisciplinary team identifies multihandicapped infants and evaluates the implications of the multiple handicaps on the child's communication development. Children who need more specialized communication programming are served for a one-year intervention/diagnostic teaching period to help them develop rudimentary communication skills or to determine a system appropriate for the infant and family. Project staff members focus on the child's communicative needs.

MEASURES OF CHILD PROGRESS:

Most children are evaluated upon referral, at exit from the program, and one year after exit. The Bayley Scales of Infant Development, the Gesell Developmental Kit, the Uzgiris-Hunt Ordinal Scales of Psychological Development, and videotapes of parent and child interaction are used for assessment. Project-developed procedures are used to assess early communication skills at six-week intervals.

PROGRAM FOR PARENTS:

The project tries to help each family understand their child's diagnosis and prognosis and actively participate in the treatment plan. The project offers educational lectures, short-term individual and group treatment, and classes in sign language and communication skills. Family members attend all diagnostic teaching intervention sessions.

FEATURES AND PRODUCTS:

The project will publish the results of a survey detailing the characteristics of the multiply handicapped deaf and a guide for planning a communication curriculum for young multihandicapped children.

28 DEMONSTRATION

ACTT

Activating Children Through Technology

ADDRESS: 27 Horrabin Hall
Western Illinois University
Macomb, Illinois 61455

PHONE: (309) 298-1634

YEAR OF FUNDING: 3

FISCAL AGENCY: Western Illinois University

DIRECTOR: Patricia L. Hutinger
OTHER STAFF TITLES: computer coordinator/adapter, child development computer specialists, programmer/adapter, trainer/programmer, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 80 children birth to age 6 years who have moderate to severe structural and functional handicaps. Families, teachers, and project staff members are viewed as partners.

PROGRAM FOR CHILDREN:

The ACTT microcomputer curriculum is designed to develop the child's expectations of control of the environment; provide augmentative communication opportunities; and reinforce autonomy, problem solving, and other selected preschool skills. The 0-3 curriculum uses the Macomb 0-3 Core Curriculum as a base prior to computer use. Commercial and project-developed software and switch-operated toys foster cause-and-effect concepts and help the child become accustomed to using a switch, a skill that leads to more sophisticated computer use. Children age 3 to 6 years use LOGO and other software which helps them acquire attending, sequencing, planning, and classification skills, as well as directional/positional relationships. Activities have been developed to reinforce the transfer and generalization of skills prior to and after computer use.

MEASURES OF CHILD PROGRESS:

Descriptions of child use of computers are being developed and confirmed with the Behavior Interaction Tool. Single-subject studies to determine factors which hinder or help each child's progress have been designed and implemented. Record-keeping software has been developed. Videotapes of sessions with selected children are analyzed, and a program to record and analyze behaviors has been coded and is being used.

PROGRAM FOR PARENTS:

Fathers and mothers are encouraged to participate in intervention sessions. Parents can come to meetings and receive newsletters and notes about child progress; they can come into the classroom and observe their children working with the computers; and they can actually conduct the intervention sessions. Parents review software and help choose programs based on their child's needs.

FEATURES AND PRODUCTS:

Project ACTT is producing manuals and software which will be available during 1986.

Indiana Network

ADDRESS: Center for Innovation in Teaching the Handicapped
2805 East 10th Street
Bloomington, Indiana 47401

PHONE: (812) 335-9761

YEAR OF FUNDING: 3

FISCAL AGENCY: Indiana University Foundation

DIRECTOR: Lewis Polsgrove
COORDINATOR: Barbara B. Fazio
OTHER STAFF TITLES: evaluator, curriculum specialist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves two rural Indiana public school districts that have early education programs. Ninety handicapped children age 3 to 5 years currently receive services. An additional 100 children birth to age 6 years are screened for developmental impairments.

PROGRAM FOR CHILDREN:

The educational component seeks to prepare mildly and moderately handicapped children for successful placement and maintenance in normal settings. The project's six classrooms use a developmental-interactionist model for instruction with a strong emphasis on systematic evaluation. The curriculum focuses on developing underlying cognitive and language concepts while enhancing play skills and social interactions. The approach is adapted from the Cognitively Oriented Curriculum and Responsive Curriculum models. Instructional objectives are based on the results of criterion-referenced assessments (Brigance Inventory of Early Development, Learning Accomplisment Profile).

MEASURES OF CHILD PROGRESS:

Child progress is measured in the classroom by observations, diagnostic probing and teaching, recording, modifying materials and instructions, and teacher self-evaluation (observational data is emphasized). Some norm- and criterion-referenced, pre/post data are also used. Computers are used to help analyze data.

PROGRAM FOR PARENTS:

A written needs assessment indicates materials and training parents seek. Parents also observe and participate in class, develop and review educational plans, apply educational techniques, and participate on the advisory board. Health, legal, social, medical, and education agencies collaborate to provide needed support.

FEATURES AND PRODUCTS:

The project will establish a statewide network of model service centers which will provide uniformly high-quality programs and investigate the utility of the microcomputer to improve problem-solving and language abilities in young handicapped children. Microcomputers will also be used to manage individual education plans and monitor the efficacy of student instruction.

30 DEMONSTRATION

NEIGHBORCARE

Integrated Family Day Care Home Model

ADDRESS: Department of Child Development and Family Studies
Purdue University
West Lafayette, Indiana 47907

PHONE: (317) 494-2942

YEAR OF FUNDING: 2

FISCAL AGENCY: Purdue University

DIRECTOR: Susan Kontos
COORDINATOR: TBA
OTHER STAFF TITLES: coordinator, trainer, assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately six to 12 handicapped children birth to age 5 years. Children are served regardless of their handicap with the exception of those having severe physical disabilities.

PROGRAM FOR CHILDREN:

One of the project's goals is to increase both the level and the coordination of services to handicapped preschool children. A second goal is to provide full-time child care and educational services for handicapped preschool children in mainstreamed family day-care homes (FDCH). A third goal is to train FDCH providers to care for handicapped children. Providers can choose to enroll in the Child Development Associate program, a nationally recognized field- and competency-based training program for early childhood educators. FDCH providers are also trained to use the HICOMP Curriculum and prescriptive teaching techniques and to develop individual education plans (IEP). After successful completion of training, providers receive a Neighborcare certificate.

MEASURES OF CHILD PROGRESS:

Pretest and posttest assessments are conducted when handicapped children first enter the FDCH and at the end of each year they remain in the home. These evaluations consist of criterion-referenced assessments in the HICOMP Curriculum and norm-referenced assessments appropriate to the child's age and handicap.

PROGRAM FOR PARENTS:

The project attempts to normalize the parents' lives and to give them skills for dealing with their handicapped children. Parents help develop individual education plans for their children, and are eligible to receive training in the use of the HICOMP Curriculum and prescriptive teaching techniques. Parents also serve on the project advisory board.

FEATURES AND PRODUCTS:

Videotapes and manuals necessary to supplement this training system will be produced.

Planning School Transitions: Family and Professional Collaboration

ADDRESS: Bureau of Child Research
223 Haworth Hall
University of Kansas
Lawrence, Kansas 66045

PHONE: (913) 864-3050
864-4295

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Kansas

DIRECTOR: Susan Fowler
COORDINATOR: Ann Higgins Hains
OTHER STAFF TITLES: families coordinator, program assistant/teacher trainer, families assistant, secretary

CHARACTERISTICS OF TARGET POPULATION:

The initial target population consists of 25 to 30 mildly to moderately handicapped children age 3 to 5 years and their families. The project serves any child who has substantial learning or behavior problems but who can benefit potentially from placement in preschools or kindergartens with nonhandicapped children.

PROGRAM FOR CHILDREN:

The project's services include a transition-training model to prepare handicapped children in their current, specialized classroom placement for transition into less restrictive classroom placements. A three-part curriculum consists of: 1) a sequenced, individually paced preacademic curriculum; 2) a behavioral skill curriculum to teach appropriate attentional, social, and mastery skills; and 3) a curriculum of transition (survival) skills to facilitate generalization of learned skills to new placements.

MEASURES OF CHILD PROGRESS:

Measures of child progress include the Kindergarten Survival Skills Checklist, developmental measures to document changes in child functioning within the major developmental areas, and a behavioral observation code to measure children's social adjustment to the new classroom and rates of teacher attention.

PROGRAM FOR PARENTS:

Parent involvement is a primary component of this project. The project attempts to: 1) help parents identify family and child needs; 2) develop and validate procedures for promoting family and professional collaboration in selecting and coordinating educational placements of children; 3) teach parents ways to monitor their child's progress; and 4) promote family participation in facilitating a child's adjustment and progress. Parent and teacher surveys are used to plan services and to evaluate satisfaction with child progress and placement.

FEATURES AND PRODUCTS:

A family systems approach is taken in assessing family skills and planning interventions for families. The project will conduct a cost analysis and will develop a manual describing the transition-training procedures and strategies to facilitate family and professional collaboration.

PREP-EDD

Parsons Regional Early Intervention Program — Evaluation, Demonstration and Dissemination

ADDRESS: Bureau of Child Research
Parsons Research Center
Parsons, Kansas 67357

PHONE: (316) 421-6550
Ext. 395

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Kansas

DIRECTOR: Lee Snyder-McLean
COORDINATOR: Valerie McNay
OTHER STAFF TITLES: preschool director; early childhood handicapped teachers; speech/language clinician; curriculum consultant; paraprofessional staff and professional consultants in psychology, motor, and social work

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped or at-risk children birth to age 5 years in a rural area.

PROGRAM FOR CHILDREN:

The project offers center- and home-based services including initial screening, interdisciplinary prescriptive evaluation, quarterly review of child progress, referrals to area agencies and specialists, help obtaining and organizing support services for families, a parent-child group, a three- and a five-day preschool, and a speech/language group. Programs focus on skills and behaviors that are functional in the child's daily living environment and require active learning on the part of the child.

MEASURES OF CHILD PROGRESS:

Child progress is assessed using the Parsons Preschool Curriculum (the Generic Skills Assessment Inventory and the Specific Skill Competencies Checklist). Each child is routinely assessed by a speech/language clinician, an adaptive physical educator, and a psychologist. Program evaluation measures include the Developmental Profile, Preschool Language Scale, the Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities, and the Vineland Social Maturity Scale. The project documents achievement of the objectives specified in the individual education plan (IEP).

PROGRAM FOR PARENTS:

Each family participates in the assessment and IEP planning process and quarterly reviews, as well as home-based training and/or carryover activities to the extent specified in their IEP. Supplementary activities include needs assessments, classroom observations, newsletters, training to improve parent interactions with other children, support groups, transition to next or joint placement services, and participation on the advisory board.

FEATURES AND PRODUCTS:

Features of the model include regional interagency administration; a flexible service delivery system; a multidimensional comprehensive curriculum; and use of a microcomputer for IEP management and monitoring performance.

Project Kidlink

ADDRESS: The Capper Foundation
3500 West 10th Street
Topeka, Kansas 66604

PHONE: (913) 272-4060

YEAR OF FUNDING: 2

FISCAL AGENCY: The Capper Foundation for Crippled Children

DIRECTOR: Julie Keller
PRINCIPAL INVESTIGATOR: Benith MacPherson
OTHER STAFF TITLES: early childhood special education teachers, speech/language pathologist, social worker, physical therapist, occupational therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 children age 2 years 9 months to school age who are primarily physically handicapped and have secondary handicaps in fine-and gross-motor, speech, language, cognitive, and social skills. Ten nonhandicapped preschoolers are also served.

PROGRAM FOR CHILDREN:

The project implements a reverse mainstreaming program. By offering full-time day care, the project attracts parents who enroll their nonhandicapped children in the existing program for developmentally delayed children. Staff members identify strategies and methods to facilitate interaction between handicapped and nonhandicapped children and the participation of nonhandicapped children as models in treatment.

MEASURES OF CHILD PROGRESS:

The extent to which individual objectives for each child are attained is documented by quarterly reviews of each child's individual education plan. Standardized measures of progress are used for all children.

PROGRAM FOR PARENTS:

Individual services are available for families based on a survey of needs. Members of the family may serve as classroom volunteers and participate in parent training sessions, in-home programs, parent discussion groups, and activities for siblings. A parent survey will be used to evaluate the quality of services received by parents.

FEATURES AND PRODUCTS:

Project staff at the Capper Foundation will prepare a blueprint for converting a traditionally segregated early intervention program in a special school setting into a more normalizing educational environment that includes both handicapped and nonhandicapped children. A series of pamphlets will describe what children do in an integrated preschool classroom and day care setting and how nonhandicapped children are involved as peer tutors in therapy sessions. To explain the overall program, a parent handbook and slidetape presentation are being developed. A parent strengths and needs assessment has been developed enabling the staff to have a good overview of the types of activities parents would like to be involved in, the information they need, and the manner in which they would like to receive information.

INTERCHANGE

Inter-Reactive Early Child to Adult Exchange

ADDRESS: INTERCHANGE
REACH Preschool Developmental Center
P. O. Box 548
Winfield, Kansas 67156

PHONE: (316) 221-1200
Ext. 419

YEAR OF FUNDING: 3

FISCAL AGENCY: REACH Preschool Developmental Center

DIRECTOR: Ronald R. Pasmore
OTHER STAFF TITLES: case managers, secretary, pediatrician, psychologist, social worker, speech-language pathologist, physical therapist, early childhood specialists, audiologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years and their families in a largely rural area. Children are at risk, high risk, or established risk for developmental delays from biomedical and socio-ecological factors.

PROGRAM FOR CHILDREN:

Weekly intervention sessions are provided at the center or at home by a case manager who is an early childhood specialist. The case manager and the family assess the child's strengths and needs, set goals for the child, and develop family strategies to meet the goals. Project staff seek to improve or maintain optimum social interaction between the child and caregivers.

MEASURES OF CHILD PROGRESS:

Child progress is measured by periodic norm-referenced and criterion-based measures, including the Bayley Scales of Infant Development, the Early Learning Accomplishment Profile (LAP), the Hawaii Early Learning Profile (HELP), and the Vulpe Assessment Battery, and videotaped observations. Change in the relationship between the caregiver and the child is measured with periodic videotapes and administration of the Home Observation for Measurement of the Environment (HOME). All intervention goals and strategies for children are assessed in terms of their potential impact on the family.

PROGRAM FOR PARENTS:

Parents are helped to maintain or increase their independence in rearing a potentially disabled child. Parents and the case manager are equal partners in planning services for the children. Child assessment intervention session activities, information, participation with other parents, and information about nonproject resources are individualized based upon the parents' perception of their family's needs. Parents' satisfaction with services is periodically assessed by a questionnaire developed by the project. Analysis of videotaped interactions between caregivers and their children during home activities is used to train caregivers.

FEATURES AND PRODUCTS:

The project has adapted the Inter-Reactive Learning Strategies (INREAL, Weiss, 1981) for interventionists working with parents and parents interacting with their children. The project also has developed ways to design services to meet individual differences between families and has incorporated naturally occurring social interaction to build effective parenting strategies.

Direct and Indirect Service Delivery to Infants

ADDRESS: Rosenwald Child Development Center
Kentucky State University
Frankfort, Kentucky 40601

PHONE: (502) 227-6184

YEAR OF FUNDING: 2

FISCAL AGENCY: Kentucky State University

PRINCIPAL INVESTIGATOR: Herman Walston
DIRECTOR: Rita Mayfield
OTHER STAFF TITLES: teacher, family coordinator, physical therapist, speech therapist, psychological consultant, pediatric nurse consultant, secretary, project evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 children, birth to age 3 years, of teenage and adult single-parent families. Children served are developmentally delayed or high-risk for developmental delay. Biological and environmental risk factors are used to determine eligibility for services.

PROGRAM FOR CHILDREN:

Children receive one and on-half hours of intervention services weekly. Older children attend group activities in the project classroom twice weekly. Home-based services are provided for younger infants and their families or where required due to family situation. During the home-based sessions, the teacher and parent discuss the child's past performance, develop an instructional plan, and implement the plan and activities.

MEASURES OF CHILD PROGRESS:

Data from a variety of assessments are used to monitor child progress and the effectiveness of the program and the teachers. Assessment instruments used include the Early Learning Accomplishment Profile, the Learning Accomplishment Profile--Diagnostic Edition, the Brigance Inventory of Early Development, the Hawaii Early Learning Profile, and the Portage Project Checklist.

PROGRAM FOR PARENTS:

A teen parenting program, in cooperation with the local hospital and public schools, is provided for single, teen parents, age 17 years and younger. Adult single parents, age 18 years and older, participate in another program. In both programs, parents and families receive information and support through family life classes, parent-to-parent groups, and counseling. Parents and families are encouraged to participate directly in the instructional planning, implementation and evaluation of their child's program. Individual notebooks of instructions and activities are developed by staff members and parents to facilitate parents' interaction with their children at home.

FEATURES AND PRODUCTS:

The project provides parents and families free transportation to and from project activities, and child care for other children in the family while the parent and infant are attending project activities. Parents and infants are provided with infant stimulation packets containing toys that facilitate parent-child interaction and enhance the child's development. Project staff also assist parents and families in locating and utilizing local services.

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STEPS

Sequenced Transition to Education in the Public Schools

ADDRESS: Child Development Center
465 Springhill Drive
Lexington, Kentucky 40503

PHONE: (606) 278-0549

YEAR OF FUNDING: 2

FISCAL AGENCY: Child Development Centers of the Bluegrass, Inc.

PRINCIPAL INVESTIGATOR: Peggy Stephens
DIRECTOR: Rita Byrd
OTHER STAFF TITLES: social worker, teachers, parent coordinator/media specialist, speech pathologist, occupational therapist, physical therapist, secretary, bookkeeper, consultants, interagency coordinators

CHARACTERISTICS OF TARGET POPULATION:

The project will develop procedures to be used by agency preschools which serve 180 handicapped children birth to age 5 years with follow-up services to children age 6 years who have exited the preschool programs. Handicapping conditions of children served include one or more significant delays in major developmental areas (fine/gross motor, speech/language, cognition, and social/self-help skills). Severity ranges from mild to severe/profound levels.

PROGRAM FOR CHILDREN:

The goal of the project is to develop and implement a community-wide interagency model for facilitating the successful transition of handicapped children from preschool programs to the least restrictive environment placements in public schools. The project establishes an interagency agreement plan with the public school outlining how children will move from preschool into public school and how teachers and project personnel will collaborate to place the child in the least restrictive environment. Transitional class options will be developed according to each child's individual needs.

PROGRAM FOR PARENTS:

Parent involvement is a key factor in the successful transition of handicapped children from preschool programs to the public school. The project sponsors a multilevel parent program which includes group in-service, individual in-service, parent newsletter, a parent resource center network, and linkage to supplemental services. During the transition year, parents are informed of advocacy issues and are introduced to the various service options available to their children. Individual educational plans include objectives related to parent linkage to the public school.

FEATURES AND PRODUCTS:

The project has generated early childhood transition objectives and a checklist of generic entry level skills for public school kindergarten, regular, and special education classrooms. Other products include a document outlining appropriate instructional activities; a training package on how to use the early childhood objectives, the Entry Level Skills Checklist, and instructional activities; a document describing coordination with the public schools and the parent transition program; and a service directory for parents.

Preventive Intervention Project

ADDRESS: Department of Mental Health and Mental Retardation
Bureau of Children with Special Needs
State House Station 40
Augusta, Maine 04333

PHONE: (207) 289-4250

YEAR OF FUNDING: 2

FISCAL AGENCY: Department of Mental Health and Mental Retardation

DIRECTOR: Edward C. Hinckley
OTHER STAFF TITLES: assessment coordinator, service coordinator, secretary

CHARACTERISTICS OF TARGET POPULATION:

Approximately 80 infants will be identified and served each year. Risk categories include organic physical and mental handicaps, circumstances of birth, and environmental conditions that could be expected to lead to emotional or behavioral disorders or developmental delays. The program also serves the families of these infants.

PROGRAM FOR CHILDREN:

The project's objectives are: to institute comprehensive newborn screening procedures and subsequent assessment; to develop an interagency, multidisciplinary service system using existing service providers; to measure the effectiveness of the screening and service delivery systems; to provide staff development and training; and to disseminate the model throughout the state in anticipation of statewide replication. Screening to identify handicapped and at-risk children takes place during pregnancy, at delivery, or during the perinatal period. After assessment, these children are referred to "Family Support Teams," drawn from private and public agencies.

MEASURES OF CHILD PROGRESS:

Initial assessment includes the Dubowvitz Measure of Gestational Age; Apgar scores at one and five minutes; weight, length, and head circumference at birth; and congenital anomalies. The project also uses the Brazelton Neonatal Behavioral Scale, the Bayley Scales of Infant Development, the Stanford-Binet Intelligence Scale, the Behar Preschool Behavior Questionnaire, and the Kuhn-Roseman Social Scale and Symptom Checklist. Assessment results determine individual service plans and monitor child and family progress.

PROGRAM FOR PARENTS:

Parent-child interactions are measured using the Home Observation for Measurement of the Environment (HOME), structured home observation scales, and the Feeding Scale. Measures of family functioning include the Schedule of Recent Events, the Family Support Scale, and the Questionnaire of Resources and Stress.

FEATURES AND PRODUCTS:

The model was developed by staff members from a variety of agencies (Maternal and Child Health, Public Health Nursing, Social Services, Special Education, and Mental Health) working with parents of handicapped children. The project will conduct a cost-benefit analysis of its techniques.

Washington County Children's Program

ADDRESS: Washington County Children's Program
P. O. Box 311
Machias, Maine 04654

PHONE: (207) 255-3426

YEAR OF FUNDING: 3

FISCAL AGENCY: Child and Youth Board of Washington County

DIRECTOR: Janet Weston

OTHER STAFF TITLES: supervisor/trainer, first-level supervisors, community education coordinator, dissemination/demonstration coordinator, secretary, town home advisors, bookkeeper, family support specialist, occupational therapist, speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 3 years and their families in rural northeastern Maine. The parents must be willing to be involved and cooperate with programming for their child.

PROGRAM FOR CHILDREN:

The project trains local residents, known as town home advisors, to provide services to handicapped children and their parents. The project offers a combination home- and center-based program. The home-based facet of the program is designed to meet the specific needs of the child and the parent. On alternate weeks, when home visits do not occur, the parents, children, and staff members participate in a two-hour group session at the center.

MEASURES OF CHILD PROGRESS:

Children's progress is evaluated via formal pre- and post-assessments and through informal observation by town home advisors, supervisors, resource personnel, and parents. The project uses the Early Learning Accomplishment Profile, the Bayley Scales of Infant Development, and the Portage Behavior Checklist.

PROGRAM FOR PARENTS:

The project develops an individual education plan (IEP) for each child's primary caregiver. The IEP is based on assessment (using the NCAST Assessment Scales developed by the University of Washington School of Nursing) of the parent's skills in three areas: feeding, teaching, and the home environment. The parent and town home advisor work together to develop activities to improve the parent's skills in weak areas. A family support specialist works with the families and project staff members to provide supportive mental health services. The project offers parent support and education groups.

FEATURES AND PRODUCTS:

The project has developed a slide-tape show and is planning a second slide tape. They have developed newborn nursery kits that offer mothers information on a variety of topics and a list of community resources. Town home advisors and parents participate in ongoing community education programs to increase local understanding of the needs of handicapped children and their families. A public awareness information packet will be developed.

RURAL

Rural Utilization of Resources to Awaken Learning

ADDRESS: Project Rural
MSAD #62
Elmwood Road
Pownal, Maine 04069

PHONE: (207) 688-4832

YEAR OF FUNDING: 3

FISCAL AGENCY: School Administrative District #62

DIRECTOR: Irving H. L. Williams
OTHER STAFF TITLES: teacher, teacher aide, speech therapist, consultants, occupational therapist, physical therapist, psychologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves six to nine children age 3 to 5 years. Most children accepted into the program display mild to moderate handicaps (developmental delays; emotional, social, or behavioral problems; physical handicaps; speech or language impairments).

PROGRAM FOR CHILDREN:

The project provides an integrated learning experience in a center-based classroom. The curriculum focuses on the development of the child's social, cognitive, and motor skills. Therapeutic sessions are interspersed with opportunities to participate in more traditional preschool experiences such as sand and water play, painting, and dress-up. In addition to individualized classroom experience, handicapped children may participate in other instructional experiences including individual tutorial sessions, specialized small-group instruction, and home-based training.

MEASURES OF CHILD PROGRESS:

Specific goals are set for the children. Children's progress on these goals is measured through observation and anecdotal records. Normative data is acquired using the McCarthy Scales of Children's Abilities, the California Preschool Social Competency Scale, and the Peabody Developmental Motor Scales. Parent checklists and conferences are also used to evaluate progress.

PROGRAM FOR PARENTS:

Parents are encouraged to use their talents and skills to contribute to the program. Parents may serve as aides in the classroom, make instructional materials, and host parent meetings. Activities for parents are based on identified needs and are provided by a parent support group.

FEATURES AND PRODUCTS:

The project provides written information about the project's model and contributes to the local school system's weekly newsletter. The project also produces its own quarterly newsletter to disseminate information about preschool special needs programs based in public schools. The model focuses on the use of existing resources from the school and community. A checklist of resources, a guide of key elements for program development, and assembled data related to cost effectiveness and child progress will be developed. A program monitor manual incorporating the efficacy data, key elements, and findings related to implementation of an early childhood special needs program in a traditional public school setting will be produced.

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PACT

Parents and Children Together

ADDRESS: PACT
77 B Warren Street
Brighton, Massachusetts 02135

PHONE: (617) 783-7300

YEAR OF FUNDING: 3

FISCAL AGENCY: South Shore Mental Health Center

DIRECTOR: Geneva Woodruff
OTHER STAFF TITLES: child development specialists, psychiatric counselor, pediatric nurse, administrative assistant, consultants

CHARACTERISTICS OF TARGET POPULATION:

PACT serves 45 high-risk children and children with special needs birth to age 5 years whose parents are incarcerated or are being treated for alcoholism or drug addiction. Parents must be receiving services from an adult agency represented on the PACT board.

PROGRAM FOR CHILDREN:

The project acknowledges that parents' basic needs must be met before they can meet the needs of their children. The project offers direct and transition services to children and their families. The project brings together a board of adult, child, and social service agencies to form a transagency alliance which results in a comprehensive, family-focused service plan for children and their parents.

MEASURES OF CHILD PROGRESS:

Norm- and criterion-referenced instruments are used to assess the rate of developmental growth at the initial assessment compared to the rate of growth at subsequent evaluations six months, one year, and two years after entry into the program. Children birth to age 3 years are assessed with the Michigan Infant Developmental Profile and the Hawaii Early Learning Profile. The McCarthy Scales of Children's Abilities and the Michigan Preschool Developmental Profile are used with children age 4 to 6 years. The Battelle Developmental Inventory, PACT Parent Interview, Family Inventory of Resources for Management, Mother-Child Interaction Scales, and videotapes are used for the PACT research design.

PROGRAM FOR PARENTS:

First, families receive short-term, intensive, home-based services. Then, the families are supported and trained in advocacy skills while they are phased into existing community agencies and educational programs. Finally, follow-up support is provided to the family while consultation and technical assistance is provided to the accepting agency. The project also offers education and support groups for adult agency staff and parents.

FEATURES AND PRODUCTS:

The project will develop materials on the effects on children of parents' incarceration and substance abuse. The project will offer training modules and workshops on issues and strategies for working with high-risk children, children with special needs, and their high-risk parents. A procedures and policies handbook, an outgrowth of this transagency model, will be published. An annotated bibliography addressing research and issues with PACT target population is available, along with a PACT brochure and fact sheet.

Pathways for Children

ADDRESS: Pathways for Children
3 Randolph Street
Canton, Massachusetts 02021

PHONE: (617) 828-6497
828-2440
Ext. 430

YEAR OF FUNDING: 3

FISCAL AGENCY: Enable, Inc.

EXECUTIVE DIRECTOR: Gerald Brown
PROGRAM DIRECTOR: Sally Hunt
OTHER STAFF TITLES: play therapist, social worker, registered nurse, special educator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves children with life-threatening illnesses or degenerative diseases. Children served are birth to age 3 years and profoundly ill and at home; age 3 to 8 years and homebound due to their debilitating medical conditions; and age 3 to 8 years and able to function in a school setting.

PROGRAM FOR CHILDREN:

Project staff members try to maximize each child's developmental potential and increase each child's ability to cope with death and degenerative disease. Services are determined by the child's condition and include individual play therapy. Staff members teach professionals to better serve seriously ill children and support classmates.

MEASURES OF CHILD PROGRESS:

Specific intervention goals are established for each family at intake and are evaluated biannually. Other measures of progress come from questionnaires which address teacher involvement and support of the child, family support of the child, community awareness of the need for these services, involvement of the child in ongoing family activities, and maintenance of the child in the least restrictive environment.

PROGRAM FOR PARENTS:

Direct intervention includes support groups for parents and individual support for siblings, resource packets, instruction for home-care management, and resources. All services are aimed at maintaining the child in the least restrictive environment, preparing the family to cope with anticipated changing educational needs and services as the child's condition deteriorates, and maximizing choices available to the family.

FEATURES AND PRODUCTS:

Workshops, resource packets, and consultation are provided to educational and health professionals. Resource packets contain relevant information on particular illnesses, resources for professionals, and a curriculum adaptable to the child. The resource packets include bibliographies of materials for children and materials for parents on the topics of death, dying, loss, and grief. Workshops for teachers cover curriculum resources, socialization, medical prognosis, behavior management, and death and dying.

Infant-Toddler Demonstration Project

ADDRESS: Language & Cognitive Development Center
P. O. Box 270
Jamaica Plain, Massachusetts 02130

PHONE: (617) 522-5434

YEAR OF FUNDING: 3

FISCAL AGENCY: Language and Cognitive Development Center

CO-DIRECTORS: Arnold Miller and Eileen Miller
OTHER STAFF TITLES: child treatment specialist, family treatment specialist, secretary, family advocate, physical therapist, coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves children under age 30 months who exhibit unusual social-emotional behavior patterns and developmental, speech, and language delays of six months or more. Typically, the children have neurological problems, exhibit autistic or autistic-like syndromes, or have experienced severe emotional or environmental deprivation. Over the three-year grant period, the project will screen about 60 children and initiate treatment for 20 to 30 children. One-third to one-half of the children served are Hispanic and/or black.

PROGRAM FOR CHILDREN:

The project provides screening, identification, and early intervention for children. Two one-hour sessions with the parent and child involve intensive cognitive developmental work within the structure of the child's relationship with the parent. Regular home visits are made monthly to generalize program activities from center to home.

MEASURES OF CHILD PROGRESS:

A therapist tracks the progress of the child and parent at each session and makes detailed assessments quarterly. Project staff members review information from: 1) the parent worker's report of parental response to therapy and observational techniques; 2) the child worker's report on the child's progress; 3) the LCDC Umwelt Scale, a system for coding the behaviors of the child and parent, used with the Umwelt Assessment (videotaping of the child in specific situations); and 4) the parent's rating of the program's effectiveness. Yearly progress is measured using pre and post administrations of standardized tests, including the Uzgiris-Hunt Ordinal Scales of Psychological Development, the Bayley Scales of Infant Development, the Sequenced Inventory of Communication Development, and the Home Observation for Measurement of the Environment.

PROGRAM FOR PARENTS:

Parents are required to help instruct their children and attend a seven-session parent education workshop. Parents receive emotional support from weekly parent support groups, therapy, family advocacy, sibling services, and sign-language classes.

FEATURES AND PRODUCTS:

The project plans to develop a booklet for parents and a film that explains early developmental problems.

Identification and Remediation of an At-Risk Preschool Population

ADDRESS: Children's Language Institute, Inc.
P.O. Box 211
Ludlow, Massachusetts 01056

PHONE: (413) 589-9161

YEAR OF FUNDING: 2

FISCAL AGENCY: Children's Language Institute, Inc.

DIRECTOR: Kathleen K. Mullins
COORDINATOR: Paul E. Quin
OTHER STAFF TITLES: speech-language pathologist/teacher, early childhood education/assistant teacher, social worker, consultants, classroom aides

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 neurologically impaired, language- and learning-disabled children age 2 1/2 to 5 years.

PROGRAM FOR CHILDREN:

The project prepares preschool, language- and learning-disabled children for successful entry into regular school and helps them attain a level of success commensurate with their level of intelligence. Children attend a half-day program five days weekly. A project-designed curriculum combines language and cognitive learning. Four normal children are enrolled in the classroom as peer models. A general preschool framework is used for class scheduling, though all curriculum is language based.

MEASURES OF CHILD PROGRESS:

Child progress is assessed formally and informally. Formal testing at the end of each year determines if the child has attained language abilities appropriate to his or her age. Follow-up and support are provided for the child and his or her public school teachers, up to and including grade two. The need for special education for project children is determined and compared to needs of children with similar deficits who were not part of a preschool program.

PROGRAM FOR PARENTS:

A social worker leads weekly group counseling sessions and parent workshops for training in child development and behavior management techniques. Individual counseling sessions and home visits are scheduled as needed. The speech/language pathologist visits each child's home five times a year to consult individually with the family about appropriate experiences for the child.

FEATURES AND PRODUCTS:

The project expects to develop a program that can be adapted for use in public schools or preschool centers. The program will include a placement test and a language-based curriculum.

Family Day Care Project

ADDRESS: Family Day Care Project
408 N. First Street
Ann Arbor, Michigan 48103

PHONE: (313) 662-1135
662-9511

YEAR OF FUNDING: 2

FISCAL AGENCY: Child Care Coordinating and Referral Services

DIRECTOR: Sylvia N. Jones
COORDINATOR: Ann Saffer
OTHER STAFF TITLES: psychological, education, medical, and evaluation consultants; program assistant

CHARACTERISTICS OF TARGET POPULATION:

This project trains family day-care providers from Washtenaw County to care for children with special needs. Day-care providers register for a series of seminars and workshops and receive regular home visits from the special services coordinator. A special effort is made to reach those people already providing day care to handicapped children.

PROGRAM:

Practical seminars span eight-month intervals. The curriculum focuses on four areas of special care: physical, cognitive, emotional, and sensory. Trainees are taught observation and screening techniques, behavioral management, and special care techniques. Some seminars address parenting skills with emphasis on the interaction between children and the providers. Child development workshops stress understanding of cognitive stages and how these relate to the planning of appropriate activities for children. Enrollees are exposed to issues related to the care of adopted, biracial, abused, neglected, and at-risk children and infants.

EVALUATION:

Evaluations of the caregiving environment using the Family Day Care Rating Scale and its adaptation for children with special needs form the core of the project's evaluation. Surveys of knowledge and attitudes of the caregiver before and after the training and before and after the placement of children with special needs are also included in the evaluative process.

PROGRAM FOR PARENTS:

Parents, caregivers, and the special services coordinator work together to form a list of social learning goals appropriate to the family day care setting for the individual child. This plan forms the base from which an individual caregiving and play curriculum for each child is generated. Case management services are also offered.

FEATURES AND PRODUCTS:

The project is developing activity and resource notebooks for providers who work with handicapped children, and a videotape which promotes mainstreamed family day care.

Detroit's Preschool Hearing-Impaired Support Center

ADDRESS: Goldberg School
1930 Marquette Avenue
Detroit, Michigan 48208

PHONE: (313) 494-2265

YEAR OF FUNDING: 3

FISCAL AGENCY: School District of the City of Detroit

DIRECTOR: Kay Gabe
COORDINATOR: Dawn Smith
OTHER STAFF TITLES: teacher, paraprofessional, evaluator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 28 hearing-impaired preschoolers from economically disadvantaged backgrounds. Project staff members encourage parents and families to become involved in program services.

PROGRAM FOR CHILDREN:

Children attend a center-based program five days weekly during the school year (39 weeks). The program's curriculum design emphasizes Piagetian concepts and theories with a primary focus on intellectual growth, language development (receptive and expressive), and social maturity. One-on-one language development skills are practiced daily with each pupil. Parents may work in the classroom as aides on a monthly basis.

MEASURES OF CHILD PROGRESS:

The project uses a wide array of methods and tools to assess student progress. The evaluation is objective-referenced and uses both standardized and nonstandardized tools. Standardized tests include the Grammatical Analyses of Elicited Language, Meadow-Kendall Social-Emotional Inventories, and the Kaufman-ABC or WISC-R. Independent time sampling of behaviors, questionnaires, and checklists are also used to measure goal attainment.

PROGRAM FOR PARENTS:

Parent and family services are a major component of the program. The project offers training sessions that deal with topics of interest to parents of hearing-impaired children. The center coordinates supplementary services which complement program goals. A Parents' Guild meets monthly to coordinate parent activities and serve as a forum for parents. A Parent Aide Program, which allows parents to participate monthly in the classroom program, teaches parents instructional techniques and skills that can be used at home. Activities for home and school are regularly provided. Parents meet with the teachers four times during the school year to discuss progress on objectives of their children's individual education plans.

FEATURES AND PRODUCTS:

The project's model departs from the traditional analytic orientation of programs for preprimary hearing-impaired children by focusing on cognitive development as a base for language, speech, and auditory learning. A replication package allows the model to be adapted to an entire program or to a single classroom in rural, urban, or suburban areas.

TRIP

Transactional Intervention Program

ADDRESS: TOTE-Woodhaven School District
Bates Elementary School
22811 Gudith
Woodhaven, Michigan 48183

PHONE: (313) 676-5458

YEAR OF FUNDING: 3

FISCAL AGENCY: TOTE-Woodhaven School District

DIRECTOR: Jacquelyn Pfalzer
COORDINATOR: Gerald Mahoney
OTHER STAFF TITLES: teacher/consultants and therapists representing the following specializations: visual impairments, emotional impairments, mental retardation, speech and language, occupational therapy, learning disabilities

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 100 severely handicapped children birth to age 3 years and their families. Handicapping conditions may include physical handicaps, mental retardation, serious emotional disturbances, and visual or auditory impairments.

PROGRAM FOR CHILDREN:

The project uses a home-based, parent-centered curriculum design. The approach focuses on the interactions between parents and their children. Each week teachers work with parents to help them improve their children's development through effective patterns of parent and child interaction. The curriculum and procedures used are derived from the transactional model of development and seek to improve the child's affective emotional development, social skills, language, and cognitive ability.

MEASURES OF CHILD PROGRESS:

Teachers observe children at weekly meetings and assess individual developmental goals. Staff members evaluate patterns of interaction between the parent and the child. Every three months, parents are videotaped while playing with or teaching their children. A rater evaluates the global dimensions of maternal and child behavior using Likert Scale judgments and the Maternal and Child Behavior Rating Scale. Every six months, teachers evaluate interactions between parent and child.

PROGRAM FOR PARENTS:

Parents learn ways of responding to their children that sustain the children's interest, motivation, and curiosity. A teacher works in the home with the parent as a partner and offers support and encouragement, designates appropriate goals, and provides a model of desirable interactions.

FEATURES AND PRODUCTS:

Staff members have developed a teacher's guide to the transactional curriculum and a software package for Apple II computers to generate individualized educational plans.

Project Dakota

ADDRESS: Dakota, Inc.
680 O'Neill Drive
Eagan, Minnesota 55121

PHONE: (612) 455-2335
454-2732
YEAR OF FUNDING: 3

FISCAL AGENCY: Dakota, Inc.

DIRECTOR: Linda Kjerland
OTHER STAFF TITLES: teacher, speech/language clinician, occupational therapist, program assistant, family service counselor, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves families with children birth to age 4 years with one or more of the following: developmental delay of 20 per cent or more in at least one area of development, diagnosed disorder highly correlated with developmental disability, or biological risk for children under age 12 months.

PROGRAM FOR CHILDREN:

Services are tailored to fit each child and family. Parents participate in planning and carrying out their child's assessment and in determining goals and settings for intervention. Strategies draw upon family and community resources as well as staff services. All infants/children have opportunities to interact with non-delayed peers on a regular basis, through family day care, neighborhood playmates, community parent-child nurseries, peer tutors, and recreation programs. The project offers flexibility in combining individual and group intervention in home, center, and community settings.

MEASURES OF CHILD PROGRESS:

Changes in children are documented using the Battelle Developmental Inventory annually. Nature and frequency of contact with non-delayed peers is recorded monthly. Parents and staff assess the child quarterly using such instruments as the Earhardt Developmental Prehension Assessment, Sequenced Inventory of Communication Development, Miller Assessment Profile, Uzgiris-Hunt Ordinal Scales of Psychological Development, Vulpe Assessment Battery, Michigan Developmental Profile, Milani-Comparetti Motor Development Test, and the Goldman-Fristoe.

PROGRAM FOR PARENTS:

All services focus on child/family needs considered essential by parents. Parent/staff interaction promotes parents' acquisition of knowledge, skills, and confidence to describe their child's strengths, interests, needs, and frustrations, and to identify and carry out goals and strategies for the child. Parent support groups, discussion groups, family events, referral assistance, annual retreat, and parent-to-parent contacts also are offered.

FEATURES AND PRODUCTS:

The project has developed videotapes and training sessions on all model components. There is also a computerized system for tracking service activities. Print materials include "Project Dakota: Tailor Made Early Intervention" and "Program Responsiveness to Parents." The project has produced a slide-tape of interviews with parents, siblings, and grandparents sharing their experiences and opinions about intervention.

48 DEMONSTRATION

Clay County Coordinated Preschool Program

ADDRESS: Lommen Hall
Moorhead State University
Moorhead, Minnesota 56560

PHONE: (218) 236-2002
236-2006
YEAR OF FUNDING: 3

FISCAL AGENCY: Clay County Vocational Cooperative Center

DIRECTOR: Evelyn C. Lynch
PROGRAM MANAGER: Robyn R. Widley
OTHER STAFF TITLES: teachers, speech/language clinician, aide, secretary, consultants, occupational therapist, social worker, public health nurses

CHARACTERISTICS OF TARGET POPULATION:

The project serves infants and children birth to age 4 years who are handicapped or at risk for handicaps and reside in Clay County. Children have hearing or vision impairments, spinal cord defects, cerebral palsy, or recognizable syndromes associated with mental retardation which result in a developmental delay in one or more areas.

PROGRAM FOR CHILDREN:

Services for children are primarily center-based in an integrated preschool setting. Children receive classroom services depending on individual needs. Those children who also require home programming are seen in the home by a representative of the cooperating agencies involved in the program. Functional goals for children are determined following an assessment of needs.

MEASURES OF CHILD PROGRESS:

All children are assessed with the Uniform Performance Assessment Scale, Bayley Scales of Infant Development, and Stanford-Binet Intelligence Scale. Other instruments used for assessment are the Carolina Record of Infant Behavior, the Adaptive Performance Instrument, and the Carey Infant Temperament Scale. All children are reevaluated quarterly. Goal Attainment Scaling is used to determine the effect of instruction on short-term developmental and behavioral goals for specific children.

PROGRAM FOR PARENTS:

Parents help design their children's educational program by completing the Parent Inventory of Child Development in Non-School Environments. Levels of parent satisfaction and involvement are evaluated annually. The program attempts to address the unique needs of each family and make available varying levels of parent involvement.

FEATURES AND PRODUCTS:

The project is a cooperative effort of public schools and community agencies to demonstrate quality and comprehensive services for handicapped infants and toddlers in rural areas. The project plans to develop technical overview papers on various program components and to present workshops on the development of programs for handicapped preschoolers. The workshops will emphasize cooperation and coordination of public schools and community agencies, the design of a functional curriculum, and the development of transdisciplinary teams for service delivery.

Language Development Model

Choctaw Handicapped Children's Early Education

ADDRESS: Language Development Model
Education Program
Mississippi Band of Choctaw Indians
Route 7, Box 21
Philadelphia, Mississippi 39350

PHONE: (601) 656-5251

YEAR OF FUNDING: 3

FISCAL AGENCY: Mississippi Band of Choctaw Indians

DIRECTOR: Pamela Dalme
COORDINATOR: Pam Thornton
OTHER STAFF TITLES: parent training aides, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped Choctaw Indian children birth to age 5 years.

PROGRAM FOR CHILDREN:

Staff members visit the home once a week to teach and train parents. Meetings are held once a month for parents to share concerns and common problems in raising children with special needs. The first effort of the program is to help parents understand their handicapped children. The goal of the program is to increase the children's language development. Materials from the Portage Parent Program and Portage Parental Behavior Inventory are used to help children's language development. Following the Portage Guide to Early Education, staff members write individual activity charts and language development guides that focus on traditional Choctaw arts and crafts (sewing, cooking, music, art, wood working, beading, basketry, weaving).

MEASURES OF CHILD PROGRESS:

Child progress is measured with the Developmental Profile II, the Peabody Picture Vocabulary, the Utah Test of Language Development, the Portage Guide to Early Education, the WISC-R, and the Leiter International Performance Scale. Individual educational programs and anecdotal information are used to record changes.

PROGRAM FOR PARENTS:

Parents are considered primary educators of their children. Staff members train parents to teach their children English language skills; refer families for medical, psychological, and social services; provide parents with education experiences; organize support groups; and involve parents in the planning and operation of the project.

FEATURES AND PRODUCTS:

The project serves a unique population of very young children who are native-language dominant, economically and educationally disadvantaged, and live in extreme rural isolation. This project has adapted and blended several existing curricula to make them relevant to Choctaw Indians. The result is a curriculum which uses the teaching and learning of traditional Choctaw Indian crafts to help parents and children increase their capacity to use the English language.

PALS

Preschool Acceptance through Language and Social Development

ADDRESS: 3208 Lexington
Kansas City, Missouri 64124

PHONE: (816) 231-1533
(816) 474-7770

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Missouri

PRINCIPAL INVESTIGATORS: Carl F. Calkins and Winifred Dunn
COORDINATOR: Leslie Caplan
OTHER STAFF TITLES: research assistants, consultants, volunteers, evaluation design specialist, secretary, teaching assistants

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 30 handicapped children age 6 months to 5 years. Handicapping conditions include cerebral palsy, mental retardation, autism, hydrocephaly, microcephaly, hearing and visual impairments, and language delay.

PROGRAM FOR CHILDREN:

PALS is a project to develop a mainstreaming model that uses trained volunteers to implement individual education plans (IEP) in language development, socialization, and social integration with handicapped children in integrated settings. Children from a university-affiliated preschool for handicapped children are integrated with children from an existing preschool currently serving nonhandicapped children. Trained volunteers help children in the transition process by providing instruction and guidance in identified goals and objectives.

MEASURES OF CHILD PROGRESS:

Volunteers and teaching assistants collect data daily on each child. Over the course of the project, five measures will be accumulated on each child: 1) number of behavioral objectives accomplished, 2) rate of acquisition of each behavior, 3) total amount of time required to reach each objective, 4) number of IEP instructional objectives met successfully, and 5) extent to which each handicapped child's behavioral repertoire is increased and becomes better matched with the Social Behavior Survival Inventory of Standards and Expectations.

PROGRAM FOR PARENTS:

Parents of children enrolled in the university-affiliated preschool participate in a parent program which has three major components: 1) daily school-home communication, 2) monthly home visits by preschool staff, and 3) monthly meetings of a parent support group. Parents of children enrolled in the community preschool participate in meetings aimed at increasing their awareness of mainstreaming.

FEATURES AND PRODUCTS:

The university-affiliated preschool and community preschool are in the same building. This allows flexibility in the design of the integration program.

Blackfeet Rural Early Education Model

ADDRESS: Napi Educational Services, Inc.
Blackfeet Tribe Head Start
Browning, Montana 59417

PHONE: (406) 338-7370

YEAR OF FUNDING: 3

FISCAL AGENCY: Napi Educational Services, Inc.

DIRECTOR: Dell Schlaht
OTHER STAFF TITLES: coordinator/occupational therapist, special educator, intake manager, home trainers, integrated classroom teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped and at-risk Native American children birth to age 8 years who reside on the Blackfeet Reservation in a rural and remote region of north central Montana.

PROGRAM FOR CHILDREN:

Children progress from a home-based infant component to a center-based Head Start preschool experience, then to public schools. Primary emphasis is on a home-based stimulation program and toddler groups for children birth to age 3 years. Home trainers who share a common cultural background with the families schedule weekly toddler groups and home visits two to four times monthly to present new stimulation activities and to work directly with the child and parent. The parent is the child's primary teacher. Mildly to moderately handicapped preschoolers are integrated into the Blackfeet Head Start classrooms. The project's integrated classroom provides daily experiences for severely handicapped children and their nonhandicapped peers in a small-group setting. Home-based services are available to children geographically unavailable for Head Start services. The project promotes appropriate transition as children leave preschool education and enter the public schools.

MEASURES OF CHILD PROGRESS:

Norm-referenced measures, criterion-referenced measures, and clinical and behavioral observations are used to measure progress. Tools and techniques include the Denver Developmental Screening Test, the Bayley Scales of Infant Development, the Uzgiris-Hunt Ordinal Scales of Psychological Development, the Sequenced Inventory of Communication Development, the Preschool Language Scale, the Preschool Language Assessment Instrument, the Peabody Motor Scales, and the new Pikuni Early Education Profile (PEEP).

PROGRAM FOR PARENTS:

Parents are involved at all levels of project operation and help develop individual education plans. Educational and support activities are offered in individual or group settings based on family need and preference.

FEATURES AND PRODUCTS:

The project features the identification and development of culturally relevant and sensitive approaches to early childhood special education programming in rural areas. This includes the identification and development of an assessment profile and curriculum, a training plan for rural paraprofessionals, and a parent involvement strategy that considers the family's culture.

52 DEMONSTRATION

Co-TEACH

ADDRESS: School of Education
University of Montana
Missoula, Montana 59812

PHONE: (406) 243-5344

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Montana

DIRECTOR: Rick VandenPol
COORDINATOR: David P. Rider
OTHER STAFF TITLES: supervising teacher, transdisciplinary facilitator, instructional therapists

CHARACTERISTICS OF TARGET POPULATION:

The project serves eight handicapped children, all of whom will be eligible for public school special services in the years subsequent to their enrollment in COTEACH. At least four of six handicapping conditions are present: mild mental retardation, moderate to severe mental retardation, sensory impairment, physical or medical problems, multiple handicaps, and autistic or autistic-like behavior.

PROGRAM FOR CHILDREN:

The major aim of this project is to ensure that child progress observed in early intervention programs is maintained. Features include assessment of adaptive behavior requirements in receiving classrooms, child training in academic independence and social competence, involvement of receiving teachers in the preschool program, and use of a "buddy system" in which older students are paired with younger handicapped students.

MEASURES OF CHILD PROGRESS:

Child progress is monitored daily through direct observation. Quarterly administrations of criterion- and norm-referenced tests assess progress in major developmental areas. Tests used include the Bayley Scales of Infant Development, Goldman-Fristoe, Alpern-Boll Developmental Profile, and Curriculum and Monitoring System (CAMS).

PROGRAM FOR PARENTS:

Parents participate each week in the classroom. Parents learn through on-the-job training, and, when necessary, through workshops and short courses, and train other staff to carry out their child's therapy program. Later, parents train the receiving teacher to deliver preschool-developed therapy programs.

FEATURES AND PRODUCTS:

The project will develop a training package which will measure and facilitate child skill maintenance and carry over.

Early Referral and Follow-Up

ADDRESS: Meyer Children's Rehabilitation Institute
444 South 44th Street
Omaha, Nebraska 68131

PHONE: (402) 559-7451

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Nebraska Medical Center

DIRECTOR: Cordelia Robinson
COORDINATOR: Barbara Jackson
OTHER STAFF TITLES: medical liaison, maternal child health nursing specialist, infant/parent educators, psychologist, educational consultant, physical therapist, occupational therapist, speech pathologist

CHARACTERISTICS OF TARGET POPULATION:

Each year, the project serves about 100 children birth to age 3 years who experience long-term hospitalizations and are identified as handicapped (mental, motor, sensory) or at significant risk for developmental problems.

PROGRAM FOR CHILDREN:

After a child is referred by an attending physician, staff members identify the child and family's medical and educational needs through interdisciplinary evaluations using norm-referenced, criterion-referenced, and clinical assessments as appropriate. Staff members are then available for consultation and direct intervention services to children and primary caretakers during the child's hospitalization. Follow-up services emphasize the transition into public school services. Staff members provide liaison services among families, their school systems, and other agencies.

MEASURES OF CHILD PROGRESS:

The project measures child progress with norm-referenced, criterion-referenced, and clinical assessments. Instruments include the the Bayley Scales of Infant Development and the Uzgiris-Hunt Ordinal Scales of Psychological Development. Progress is also documented in each developmental domain for which there are targeted goals.

PROGRAM FOR PARENTS:

Participation by parents is an integral part of the curriculum's design. The project seeks to help parents identify needs. The Teaching Skills Inventory assesses parents' skills in using developmental intervention techniques.

FEATURES AND PRODUCTS:

The project's early link to local school districts expedites the delivery of services to chronically ill and hospitalized infants and toddlers. Products will be developed to facilitate the provision of parent-mediated, interdisciplinary programs for hospitalized infants and toddlers. Materials may include guidelines for training experiences for disciplines represented by project staff, a framework for designing parent interventions based upon family assessment tools, and fact sheets regarding diagnosis, diagnostic and medical intervention procedures, and pediatric mediations.

Project Participate

ADDRESS: Department of Psychology
University of Nebraska at Omaha
Omaha, Nebraska 68182

PHONE: (402) 333-0620

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Nebraska

DIRECTOR: Steven Rosenberg
COORDINATOR: Mary Clark
OTHER STAFF TITLES: secretary, technical assistant, speech-language pathologist, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 5 years of varying cognitive abilities who have severe motor impairments. Most are nonambulatory, have limited hand use, and do not communicate verbally. Six children are served in preschool classrooms; six infants and toddlers are served in homebound programs.

PROGRAM FOR CHILDREN:

The primary goal of the project is to enable children to interact more actively with their environment through the use of adaptive devices, including microcomputers. Following a comprehensive assessment of the child's needs, project staff select and adapt appropriate hardware and software. Switches to operate the computers are selected for each child, taking into account the child's positioning requirements and range of movement. The children use software programs that are designed to build social and self-help skills as well as cognitive and communication skills. The model project is carried out within an existing public school program for handicapped infants and preschoolers. Preschool age children attend preschool five days weekly. Infants are enrolled in a home-based program which offers two one-hour home visits weekly, as well as the supplemental services of an occupational therapist and a physical therapist.

MEASURES OF CHILD PROGRESS:

Children are evaluated at intake and again at the end of the school year. Instruments used include the Uzgiris-Hunt Ordinal Scales of Psychological Development, Sequenced Inventory of Communication Development (SICD), Sensorimotor Communication Profile, and Brigance Inventory of Early Development. Adaptations are made in the assessment strategy to minimize the degree to which the physically disabled child is penalized because of poor motor performance. Observational measures of child participation and child communication have been developed. These are used to assess the classroom effects of interventions on the children.

PROGRAM FOR PARENTS:

Parents participate in instructional and support programs which encourage their active participation in their child's educational program. Training related to the use of adaptive devices is planned.

FEATURES AND PRODUCTS:

The project will identify decision processes for physically handicapped children which guide assessment and intervention efforts. The project also proposes to develop and validate staff training in the use of the technology.

PACEER

Parent and Child Early Education Resources

ADDRESS: Research and Educational Planning Center
College of Education
University of Nevada at Reno
Reno, Nevada 89557

PHONE: (702) 784-4921

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Nevada at Reno

DIRECTOR: Gretta B. Moon
COORDINATOR: Sue Detroy
OTHER STAFF TITLES: early childhood specialist; teacher assistant; graduate assistants; parent coordinator; occupational therapy, physical therapy, and speech pathology consultants

CHARACTERISTICS OF TARGET POPULATION:

This project serves children birth to age 3 years who are severely to profoundly handicapped or are at medical or environmental risk for developmental delays. Normally developing peers also are served. The project expects to serve 45 children during the three years of the demonstration grant.

PROGRAM FOR CHILDREN:

The project offers weekly Toddler Group and Parent/Child Group sessions at the center. Individual sessions in the home or center are available weekly. Based on assessment information and parent input, individual developmental goals are established in the areas of cognition, communication, motor, social, and self-help. Therapy services are provided on a consultation basis. Non-handicapped peers and siblings are involved in the program.

MEASURES OF CHILD PROGRESS:

Each child's progress on individual developmental goals is assessed weekly. Developmental goals are based on information gathered from the Early Intervention Developmental Profile, the Hawaii Early Learning Profile, and Scales of Sensorimotor Development based on the Uzgiris Hunt Ordinal Scales of Psychological Development. Interactions between parents and children are videotaped regularly and assessed.

PROGRAM FOR PARENTS:

The project works to enhance interactions between parents and children. Parents are asked to be present and to participate in all individual sessions with their child. The project offers opportunities for classroom volunteering, parent groups, group parent-child sessions in the classroom, and special speakers and individual counseling led by the parent coordinator. A Dad's Group meets monthly. Classes are offered in topics such as child development, advocacy, legal issues, and coping with stress. Parents are involved in project planning, child assessment, program implementation, and evaluation. A family assessment tool has been developed and implemented.

FEATURES AND PRODUCTS

The project conducts in-service staff development activities and, through the University of Nevada at Reno, provides a site for professional pre-service and in-service training.

56 DEMONSTRATION

HAPPY

Home Activity Program for Parents and Youngsters

ADDRESS: Nevada State Department of Human Resources
Division of Mental Health and Mental Retardation
480 Galletti Way
Sparks, Nevada 89431

PHONE: (702) 789-0284

YEAR OF FUNDING: 1

FISCAL AGENCY: Nevada State Department of Human Resources

DIRECTOR: Marilyn Walter
COORDINATOR: Cybil Perkins
OTHER STAFF TITLES: child development specialist, physical therapist, communication disorders specialist, educational consultant, computer consultant, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 20 families in isolated rural Nevada counties who have handicapped children birth to age six years. All handicapping conditions are included.

PROGRAM FOR CHILDREN:

The project provides in-home service through the use of computerized curricula and video equipment. Following assessment, project staff design a curriculum which meets the individual needs of the child. Project staff visit the home monthly implementing parent/child intervention plans. Monthly videotapes are made of children during assessment and parent/child performance of recommended curriculum home activities.

MEASURES OF CHILD PROGRESS:

Multiple measures are used to assess child progress at regular intervals. Following an initial screening, the child's abilities are evaluated using both standardized and criterion-referenced tools. Medical, psychological, and other related data is collected as necessary. Parents regularly gather data on their child's progress at home. Videotapes are reviewed by project staff to assess progress and update individualized curricula.

PROGRAM FOR PARENTS:

Parents receive training and services via instructional videotapes as well as from project case managers. Individual parent/family needs and abilities serve as the base for determining an appropriate curriculum. Parents receive coaching on child development, social learning concepts, and limit-setting techniques, and also are trained in data collection. Parents are encouraged to become active members of CHANCE, a Nevada parent group which supports handicapped children's education.

FEATURES AND PRODUCTS:

The project will develop an up-to-date means of identifying the particular needs of targeted children, and use computer and videotape technology to provide each child with appropriate education/therapeutic programs. Because project families live in isolated rural areas, videotapes of parent/child home activities are used in lieu of regular home visits by therapists in order to reduce program costs.

COPING

Children's Optimal Progress in Neurodevelopmental Growth

ADDRESS: Pediatric Rehabilitation Department
John F. Kennedy Medical Center
2050 Oak Tree Road
Edison, New Jersey 08820

PHONE: (201) 548-7610

YEAR OF FUNDING: 3

FISCAL AGENCY: John F. Kennedy Medical Center

CO-DIRECTORS: G. Gordon Williamson and Shirley Zeitlin
COORDINATOR: Margery Szczepanski
OTHER STAFF TITLES: psychologist, occupational therapist, special educator, speech and language pathologist, physical therapist, nurse, developmental specialist

CHARACTERISTICS OF TARGET POPULATION:

COPING serves 25 families with children birth to age 3 years who have neuromotor dysfunction as evidenced by abnormal muscle tone, postural instability, developmental delay, and problems of sensory integration.

PROGRAM FOR CHILDREN:

The COPING program integrates medical, therapeutic and educational services designed to enhance the life outcomes of children by increasing their developmental skills and adaptive coping behaviors. Intervention focuses on increasing the children's developmental capabilities in the areas of postural control, mobility, manipulation, cognitive processing, and communication. Specific strategies are used to help the children learn to cope more effectively in their day-to-day environments. Children receive services one to three days per week in center- or home-based settings.

MEASURES OF CHILD PROGRESS:

Children's progress is measured through pre- and posttesting of developmental skills and adaptive behavior patterns. Assessment instruments include the Coping Inventory, the Early Coping Inventory, the Milani-Comparetti Motor Development Screening Test, the Uzgiris-Hunt Ordinal Scales of Psychological Development, and the Hawaii Early Learning Profile.

PROGRAM FOR PARENTS:

A Coping with Stress model is used as the basis for intervention with families. Parents use self-rated assessment instruments to identify their stressors, coping resources, and vulnerabilities, and collaborate with project staff to develop personalized family intervention plans.

FEATURES AND PRODUCTS:

COPING is testing two original models of intervention. Services to children are based on the Coping through Personalized Learning model. A book is being written for its dissemination. Services to families, based on a Coping with Stress model, will be described in a family intervention manual. The early Coping Inventory (research edition) assesses adaptive behavior patterns and sensory motor responsiveness of children who function developmentally from age 4 to 24 months.

58 DEMONSTRATION

Language Interaction Intervention Project

ADDRESS: Medical Education Building CN19
Rutgers Medical School - UMDNJ
New Brunswick, New Jersey 08903

PHONE: (201) 545-1739

YEAR OF FUNDING: 3

FISCAL AGENCY: Rutgers Medical School

DIRECTOR: Michael Lewis
COORDINATOR: Lucille Weistuch
OTHER STAFF TITLES: pediatric trainer, research assistant, speech pathologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age 2 to 5 years who exhibit cognitive and language delays.

PROGRAM FOR CHILDREN:

The project is designed to train mothers to communicate effectively with their children and to improve their children's communication. Children and mothers receive two hours of programming twice weekly. For the first hour of programming, mothers and children are separated. Mothers are trained in the use of language and application of specific techniques. Children are involved in developmentally appropriate activities with a speech pathologist. During the second hour, mothers participate in the classroom with their children.

MEASURES OF CHILD PROGRESS:

Changes in responsive and initiative behaviors of mother and child are evaluated. Measures of child communication include the Mother-Child Language Interaction Scale and the child's observed MLU (mean length of utterance). Standard psychometric tests are used to determine if the intervention program affected the child's general cognitive performance.

PROGRAM FOR PARENTS:

Mothers participate in biweekly training sessions designed to: 1) increase understanding of principles of early language development; 2) increase understanding of how their own speech contributes to the children's language development; 3) increase ability to map the objects, events, and actions in the children's seeable world; and 4) increase ability to respond contingently to their children's communications. Mothers participate in classroom activities with their children and practice skills and techniques learned in the workshops. Biweekly home visits are made to encourage generalization of skills from the classroom to the home.

FEATURES AND PRODUCTS:

A manual will be developed that details the theoretical frameworks of the program, the actual strategies to be used, and the manner in which strategies can be incorporated into daily activities. The manual is designed to be a practical tool for practitioners to use in the classroom.

GAP

Parent-Infant Growth, Advocacy and Planning

ADDRESS: University of New Mexico
School of Medicine
Department of Pediatrics/Neonatology
Albuquerque, New Mexico 87131

PHONE: (505) 277-4361

YEAR OF FUNDING: 2

FISCAL AGENCY: University of New Mexico, School of Medicine

DIRECTOR: Ginny Munsick-Bruno
OTHER STAFF TITLES: clinical assistant, occupational therapist, nurse, systems specialist, environmental analyst, program consultants, educational specialist

CHARACTERISTICS OF TARGET POPULATION:

The children and families served by this project receive care within the university's newborn intensive care unit. Over 530 premature or critically ill infants are admitted to the unit each year. Over half the children are Hispanic or Native American.

PROGRAM FOR CHILDREN:

The primary goal of this project is to apply an integrated medical/developmental intervention model that maximizes the developmental potential of the parent and infant. Developmental intervention is designed to fit naturally into the medical routine. Training activities, routines, and materials prepared for parents, nurses, and volunteer cuddlers promote optimal development during daily activities such as diapering, feeding, and medical procedures. Specific intervention programs are designed and implemented when needed. The parent's relationship with the infant is defined by direct teaching, modeling, repetition, and positive reinforcement. Parents are encouraged to learn about their children, about services and service systems available, and how to advocate for their children after discharge. Continued infant assessment and support to parents is available.

MEASURES OF PROGRESS:

Staff members observe the child's positions and environment and the way the parent and the nurse handle the infant. Nurses' notes about the child's development and responsiveness are examined, and parents provide feedback about the care their children received in the newborn intensive care unit. Professionals offer feedback about their relationships to the infants and parents and their own participation in the project.

FEATURES AND PRODUCTS:

The project will develop a process to assess the project's environment in order to identify areas into which development can be incorporated. A procedural guide on how to integrate developmental services within the environment and a developmental handbook describing services and activities that can be integrated will be produced.

A Continuum of Services in Rural Northern New Mexico

ADDRESS: Las Cumbres Learning Services, Inc.
P. O. Box 663
Los Alamos, New Mexico 87544

PHONE: (505) 662-4323

YEAR OF FUNDING: 3

FISCAL AGENCY: Las Cumbres Learning Services, Inc.

DIRECTOR: Patricia Tompkins-McGill
COORDINATOR: Marilyn Price
OTHER STAFF TITLES: teachers/trainers, paraprofessionals, physical therapist, speech therapist, secretary/bookkeeper.

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 8 years who are handicapped or at risk. A large percentage of the population served is Hispanic and Native American. The majority of the children served are under age 5 years. A continuum of services is offered throughout a large rural region.

PROGRAM FOR CHILDREN:

There are five program components: 1) a severe/profound classroom/training center; 2) a mainstream classroom; 3) rural satellite preschool services (including an infant home-bound model); 4) resource support to mainstreamed children; and 5) a resource, materials, and toy-lending library. The severe/profound classroom is operated in cooperation with Espanola public schools. Three school-age and three preschool children participate under the supervision of a public school teacher and an aide trained by Las Cumbres staff. An instructor from Las Cumbres is in the classroom whenever preschool children are present. Preschool children attend one day per week and receive homebound services. The curriculum draws from the Hawaii Early Learning Profile, the Carolina Infant Curriculum, and other works providing sequential programming and assessment methods. The mainstream classroom is therapy based, using the Neurodevelopmental Training Model. Curriculum guides include the Portage Guide to Early Education, the Learning Accomplishment Profile, Brigance Inventory of Early Development, and the Guide for Integrating Handicapped and Non-Handicapped Children (Albuquerque Special Preschool). The rural satellite center receives, screens, and assesses referrals; provides direct service; trains personnel; and provides support services. The direct service component follows a home-based model, with a member of the transdisciplinary team acting as case manager or home programmer. One-hour home visits are scheduled weekly.

MEASURES OF CHILD PROGRESS:

Success on individual objectives and performance on standardized tests of child development are used to measure child progress.

PROGRAM FOR PARENTS:

The project offers a variety of services, including a bilingual lending library, to help parents cope with their child's handicap. Parents are encouraged to observe their children at the project, to carry out learning activities at home, and to help plan and evaluate the program. Parents of children enrolled in the home-based program receive training at home.

FEATURES AND PRODUCTS:

Trilingual service capabilities exist. Some materials will be written in Spanish and English. A training packet for paraprofessionals and a parent/ staff handbook are among the anticipated products.

TIPS

Training in Parenting Skills

ADDRESS: P. O. Box 2332
Santa Fe, New Mexico 87504

PHONE: (505) 988-3803

YEAR OF FUNDING: 1

FISCAL AGENCY: New Vistas

DIRECTOR: Evangeline Moncayo
PROJECT MANAGER: Carolane McNees
OTHER STAFF TITLES: early childhood specialist, adult developmental disabilities specialist, project evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 families, each of which has at least one developmentally disabled parent serving as primary caretaker to children birth to age six years.

PROGRAM FOR CHILDREN:

The activities of the project are primarily directed toward the parents and community service providers, although the goal of the project is to reduce or eliminate the risk for developmental disabilities in children whose parents are developmentally disabled. Intervention takes place in the home, the project's home-style center, and settings in other agencies. Individual sessions and weekly play groups for parents and children are designed to meet the individual needs of the child. Project staff assist parents in finding the most appropriate educational and social setting for the children served.

MEASURES OF CHILD PROGRESS:

Child progress is measured using standardized instruments such as the Bayley Scales of Infant Development, Learning Accomplishment Profile, and Sequenced Inventory of Communication Development (SICD). Data is also kept on other progress indicators such as number of children placed in mainstreamed environments, health and safety of children, parental attitudinal changes, and contact with other service agencies. Detailed family logs are kept by project staff.

PROGRAM FOR PARENTS:

Parents' strengths and needs are determined at enrollment, and parent learning styles are assessed using the Perceptual-Memory Test. The project employs communication techniques that rely on experiential rather than didactic teaching methods. Parents also participate in parent/child play groups and in parent support groups. Intervention takes place over a one-year period after which follow-up support begins. Project staff visit the home at least weekly.

FEATURES AND PRODUCTS:

Project staff provide technical assistance to other community service providers on how to work with children and parents with special needs. The project supplies a comprehensive case management service which involves social service agencies, public health agencies, the court systems, medical professionals, local transportation and employment offices, and vocational rehabilitation.

Young Babies, Young Moms

A Training Program for Adolescent Mothers

ADDRESS: Cantalician Foundation, Inc.
3233 Main Street
Buffalo, New York 14214

PHONE: (716) 833-5353

YEAR OF FUNDING: 2

FISCAL AGENCY: Cantalician Foundation, Inc.

DIRECTOR: Sharon Lansing
COORDINATOR: Sister M. Lorita
OTHER STAFF TITLES: supervisor, teacher/trainer, data collector, nurse, physical therapist, occupational therapist, volunteers, play learning specialist

CHARACTERISTICS OF TARGET POPULATION:

This project serves 60 teenage mothers. The mothers must be unfamiliar with child-care community services; have an at-risk, handicapped, or developmentally or physically delayed infant birth to age 36 months; have a definite need to secure information about educational programs for their child; and be economically disadvantaged. The program also addresses the specific issues surrounding developmentally delayed or mentally retarded mothers.

PROGRAM FOR MOTHERS AND CHILDREN:

In the classroom component, classes convene three times weekly and cover topics in education, psychosocial development, health care, and family services. Classes continue for eight months and are followed by home visits for three months. The curriculum is an expanded version of the Infant Stimulation/Mother Training materials which focus on teaching child development to young mothers and improving the amount and quality of interaction between mother and infant. The project also helps mothers develop home management, budgetary, and community adaptation skills. The Family Service component of the project uses a curriculum adapted from the Cantalician Center for Learning's Specialized Family Program and the Infant and Toddler Learning Program. Toddlers can attend class three times weekly. A play learning specialist also works with mothers to carry over classroom learning to the home environment.

MEASURES OF CHILD PROGRESS:

Children are pretested using the Bayley Scales of Infant Development. Posttests are administered biannually and at program exit. The Bzoch-League Receptive-Expressive Emergent Language Scale (REEL), Brigance Inventory of Early Development, and occupational-physical therapy evaluations are also used.

FEATURES AND PRODUCTS:

The project will produce a series of videotapes for in-house use which will cover areas of child development. The project also will produce for illiterate and developmentally delayed mothers an illustrated version of the curriculum described above and a "Baby Book" for mothers to use to record health and immunization data, milestones in child development, and important phone numbers. A list of types of toys appropriate to specific developmental disabilities also will be included in the curriculum. To help others replicate the model, staff members are developing an implementation manual which will address the project's needs, timetables, resources, and networking efforts.

Special Friends and Computer Project

ADDRESS: Children's Center
4635 Union Road
Cheektowaga, New York 14225

PHONE: (716) 633-4448

YEAR OF FUNDING: 1

FISCAL AGENCY: United Cerebral Palsy Association of Western New York, Inc.

DIRECTOR: Susan Zippiroli
COORDINATOR: Susan Mistrett
OTHER STAFF TITLES: parent coordinator, staff trainer, data collector, model specialists, external evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 24 motor- and language-impaired preschoolers age three to five years and their parents. Four groups are targeted: 1) severely physically handicapped children of normal intelligence who are non-vocal communicators; 2) severely physically handicapped children of normal intelligence who are vocal communicators; 3) communicating multihandicapped children who function intellectually 1.5 standard deviations or more below the mean of the general population; and 4) verbal learning disabled children who have mild physical handicaps.

PROGRAM FOR CHILDREN:

The project uses computer-based learning and play to develop communication, socialization, and school survival skills in the target group. Handicapped children are paired with nonhandicapped children for computer work under the supervision of a staff member or parent in one and one-half hour sessions twice weekly. Software used deals with: pre-academic readiness skills, communication skills, and socialization and play/ exploration. Computer hardware is modified to meet the needs of physically handicapped students.

MEASURES OF CHILD PROGRESS:

Children are pre- and post-tested on pre-academic readiness, communication, and socialization skills. Preschool teachers evaluate targeted students' behavior in the classroom. Data keepers record response and social interactions, and skill development is gauged in terms of the number of correct responses. Videotapes of the interactions are also analyzed for program evaluation.

PROGRAM FOR PARENTS:

Parents are trained along with staff and work directly with the children under the supervision of project staff members. Training sessions provide an orientation to the project, exposure to software and hardware, introduction to play activities, discussion of follow-up activities, and information regarding the management of children's personal needs and behavior during transportation and at the labs.

FEATURES AND PRODUCTS:

The project will publish a description of computer play procedures, software, and hardware used in the program, and a report on project effectiveness in maintaining and generalizing social/communication behaviors in handicapped children.

TIPS

Television Instruction for Parent Support

ADDRESS: TIPS
460 West 34th Street
New York, New York 10001

PHONE: (212) 563-7474

YEAR OF FUNDING: 2

FISCAL AGENCY: Young Adult Institute, Inc.

EXECUTIVE DIRECTOR: Joel M. Levy
PROJECT DIRECTOR: Jordana Zeger
COORDINATOR: Maureen Lynch
OTHER STAFF TITLES: administrative assistant, bilingual translator

CHARACTERISTICS OF TARGET POPULATION:

The project will reach about 500 mentally retarded infants and young children, their parents, and other family members who reside in the New York metropolitan area and Westchester County.

PROGRAM FOR CHILDREN AND PARENTS:

Through a project-developed weekly television series, families receive training, counseling, crisis intervention, life planning, information and referral services, and other support services essential to the maintenance of a handicapped child in the community. By providing a cost-effective, comprehensive, coordinated network of support in the most accessible place--the home--the project expects to help avert unnecessary family dissolution and institutional placement of disabled children. A hotline staffed by trained individuals guides parents to appropriate resources. The series will be translated into Spanish and simulcast via radio.

FEATURES AND PRODUCTS:

Written training manuals, companions to each program, will be developed and made available to viewers. A brochure describing the TIPS television series is distributed throughout the target area and especially to families from low-income, high-risk, and minority groups. Twenty-six 30-minute videotapes with accompanying training manuals will be produced and made available to agencies upon request.

Project CHIME

Children who are Hearing-Impaired in Mainstream Environments

ADDRESS: Harold D. Fayette School
1057 Merrick Avenue
North Merrick, New York 11566

PHONE: (516) 486-7711

YEAR OF FUNDING: 2

FISCAL AGENCY: Board of Cooperative Educational Services (BOCES) of Nassau County

DIRECTOR: Maureen Metakes
COORDINATOR: James Elliott
OTHER STAFF TITLES: teacher trainer, psychologist, audiologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves six to eight hearing-impaired children age 2 to 5 years who attend the BOCES Program for the Hearing Impaired. Degree of hearing loss ranges from mild to profound.

PROGRAM FOR CHILDREN:

Children attend a mainstream program at a demonstration preschool site up to three mornings weekly. The remaining time is spent at the BOCES Hearing Impaired Preschool Program. Length of time for placement varies according to each child's individual education plan (IEP). The project-developed curriculum used in demonstration mainstream sites is an adaptation of traditional nursery school activities. Prototype preschool sites that will serve as demonstration centers include a regular nursery school, a day care center, a mother/child play group, and nursery schools affiliated with religious institutions.

MEASURES OF CHILD PROGRESS:

Baseline data is collected on all children. The project uses the following instruments annually: Assessment of Children's Language Comprehension, the Beery Developmental Test of Visual Motor Integration, Meadow Kendall Social-Emotional Assessment Inventory for Deaf Students, SKI*HI Language Development Scale, and the Learning Accomplishment Profile. Ongoing assessment of each child's progress is monitored through systematic observation and update of IEP objectives.

PROGRAM FOR PARENTS:

Activities center around training parents to teach their children communication skills at home. Parents of mainstreamed children attend monthly parent education classes which focus on project-related information. Parents of both handicapped and nonhandicappped children can attend workshops and orientation sessions pertaining to the mainstreaming of hearing-impaired children. Parents of handicapped children attend conferences about their children's IEPs and help gather data.

FEATURES AND PRODUCTS:

The project will provide ongoing training and support to teachers of mainstreamed hearing-impaired children in nursery schools and day-care centers.

Creating Least Restrictive Options

ADDRESS: Jowonio School
215 Bassett Street
Syracuse, New York 13210

PHONE: (315) 479-7744

YEAR OF FUNDING: 3

FISCAL AGENCY: Syracuse University

DIRECTOR: Ellen B. Barnes
OTHER STAFF TITLES: consulting teacher, psychologist, evaluation assistant, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves children who are autistic, emotionally handicapped, or multihandicapped. Children age 1 to 6 years attend the demonstration classroom, and children age 3 to 7 years participate in the consultation component.

PROGRAM FOR CHILDREN:

The project operates a model mainstreaming program with six classrooms. Each classroom has a ratio of two nonhandicapped children to one child with special needs. A speech and language therapist works with the children daily. The project helps with placement of children in mainstream classrooms by working with the classroom teacher, providing crisis intervention, and introducing materials on integrated programming for teachers and administrators.

MEASURES OF CHILD PROGRESS:

Children's developmental progress is measured with techniques outlined in the Developmental Therapy Curriculum and on instruments such as the Early Learning Accomplishment Profile. The effects of integration on social interaction are assessed by videotaping the children's actual interactions and behaviors and coding these tapes using a system developed by the project.

PROGRAM FOR PARENTS:

Parents are invited to participate in parent groups and community workshops. Parents may also receive at-home and in-school training and intensive consultation.

FEATURES AND PRODUCTS:

The project offers a field-based seminar on teacher behaviors that helps integrate handicapped and nonhandicapped children. The project will develop manuals on mainstreaming and related topics for administrators, teachers, and parents.

Charlotte Circle Project

ADDRESS: Department of Curriculum and Instruction
University of North Carolina at Charlotte
Charlotte, North Carolina 28202
PHONE: (704) 597-4499
YEAR OF FUNDING: 1

FISCAL AGENCY: University of North Carolina at Charlotte

DIRECTOR: Mary Lynne Calhoun
COORDINATOR: Terry Rose
OTHER STAFF TITLES: teacher, developmental therapist, licensed practical nurse/aide, secretary, graduate assistants

CHARACTERISTICS OF TARGET POPULATION:

The program serves seven to 12 children birth to age three years who reside in Mecklenburg County and are severely or profoundly handicapped.

PROGRAM FOR CHILDREN:

The project is housed at St. Mark's Center, a developmental day program for severely handicapped children. The major goal of the project is to enhance the relationship between parents and their handicapped children by increasing the child's responsiveness, reducing the frequency of stressful behaviors, promoting the acquisition of developmental skills, and providing respite care. Each child spends 3 to 5 days per week in the center-based program and participates in a one-hour weekly home visit. Center-based activities include massage; music; tactile, visual, and auditory stimulation; vocal play; occupational and physical therapy; oral stimulation; therapeutic feeding; language stimulation; toilet training; and reduction of identified interfering behaviors. During the home visit, staff members observe parents conducting specified activities, demonstrate the program to other family members, and help solve problems regarding daily life with a handicapped child.

MEASURES OF CHILD PROGRESS:

Child progress is evaluated by pre- and post-test data on norm-referenced and criterion-referenced instruments, including the Developmental Activities Screening Inventory II and Carolina Curriculum for Handicapped Infants Assessment Log. Evaluation of social reciprocity between child and parent is based on observational data collected through questionnaires, direct observation, and videotapes. Project staff will develop a social reciprocity scale and other checklists to evaluate parent/child progress.

PROGRAM FOR PARENTS:

Parents receive home visits, center-based parent/child education, a parent support group, and respite time while the child is in the center-based program. Parents are invited to spend Friday mornings at the center involved in activities with their children.

FEATURES AND PRODUCTS:

The project is a collaborative effort between UNC-Charlotte and St. Mark's Center. Strategies for interagency cooperation will be developed and shared. The project also will develop a Social Reciprocity Behavior Rating Scale and a curriculum for very young, severely handicapped children and their families that can be used in a variety of service delivery models.

HAPPEN

Helping Agencies Promote Parent Empowerment through Networking

ADDRESS: Family Infant and Preschool Program
Western Carolina Center
Morganton, North Carolina 28655

PHONE: (704) 433-2661

YEAR OF FUNDING: 1

FISCAL AGENCY: Appalachian State Univeristy

DIRECTOR: Carolyn Cooper
COORDINATOR: Janet C. Weeldreyer
OTHER STAFF TITLES: education consultants, project evaluator, clerk-typist

CHARACTERISTICS OF TARGET POPULATION:

The population served includes the family of any handicapped or at-risk child, birth to age eight years, who requires assistance in the networking of services among different agencies. Twenty to 25 families who reside in a four-county rural area will be served during the first year. Half of these families are economically disadvantaged. Priority is given to minority or underserved children. Special effort is given to assist children and their families in the transition from regional hospital care back to their home communities, and from preschool services to the public schools.

PROGRAM FOR CHILDREN:

The project focuses on mediating linkages between families and service providers and between families and informal support networks. Already available services are accessed and networked to meet the individual needs of the child and family. The project includes members of all ecological units (siblings, relatives, friends, church members, community members) as resources that bear on the well-being of the handicapped child.

MEASURES OF CHILD PROGRESS:

Assessment data is collected quarterly to monitor child progress and development. Tools used include the Bayley Scales of Infant Development, Stanford-Binet Intelligence Scale, Uzgiris-Hunt Ordinal Scales of Psychological Development, Learning Accomplishment Profile, Early Learning Accomplishment Profile, Griffith's Mental Development Scale, Vineland Social Maturity Scale, and Brigance Inventory of Early Development. A developmental checklist is administered by the parent every six months.

PROGRAM FOR PARENTS:

The project attempts to involve all members of the family. It offers advocacy training, ancillary support (physical, emotional, etc.), communication training, and other services and activities that enhance the parent's ability to ensure the child's needs will be met as linkages develop. Parents also serve on the project's advisory council and help to evaluate the program. The project offers workshops for siblings.

FEATURES AND PRODUCTS:

The project will develop a "transecological networking" process. Exemplary aspects of the project will be packaged for dissemination. The project also puts out a bimonthly newsletter and a project brochure and poster.

SUNRISE

Support Network of Rural Intervention Services

ADDRESS: Family, Infant, and Preschool Program
Western Carolina Center
300 Enola Road
Morganton, North Carolina 28655

PHONE: (704) 433-2865
433-2661

YEAR OF FUNDING: 3

FISCAL AGENCY: Appalachian State University

DIRECTOR: Carl J. Dunst
COORDINATOR: R. A. McWilliam
OTHER STAFF TITLES: model demonstration coordinator, co-op managers, project evaluator, clerk typist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 40 to 50 mildly to profoundly handicapped children birth to age 6 years and their parents. Handicaps may include mental retardation and speech, hearing, vision, orthopedic, and other health impairments.

PROGRAM FOR CHILDREN:

The project operates five center-based parent cooperative preschools in rural western North Carolina. The centers average six children each and are open two half-days weekly, year-round. Parents work in the classrooms as teachers. The classroom program targets appropriate behavior, social interactions, preacademic preparation, independence, and high engagement levels. A major focus is the children's attentional and active engagement with adults, peers, and the physical environment.

MEASURES OF CHILD PROGRESS:

Transdisciplinary assessments are conducted at entry and are updated quarterly. Overall progress is assessed via the Griffiths Mental Development Scales, the SUNRISE Assessment and Program Plan (SAPP), and other instruments as needed. Ongoing progress is monitored using the Griffiths and project-developed behavior monitoring routines and engagement rating scales. The project is exploring alternative indices of child outcomes as part of its model development.

PROGRAM FOR PARENTS:

Co-op managers teach parents basic child care, intervention, and behavior monitoring routines. These routines are designed to give parents the necessary skills and competencies to function as preschool teachers, to enhance the children's behavior and development; and to measure the children's acquisition of target behaviors. Parents help with management, teaching, keeping records, and maintaining the center. Siblings of the handicapped children attend the co-ops, and special training events are scheduled for parents as needed.

FEATURES AND PRODUCTS:

In addition to the SAPP, SUNRISE has produced the Operations and Management Guide which describes procedures for establishing co-op programs; procedures for training parents to implement basic child care, intervention, and behavior monitoring routines; and innovative teaching methods for preschoolers with and without handicaps. The project has developed systems for parent training, efficient use of program time, and maximum parental involvement.

First Years Together

ADDRESS: First Years Together
501 S. Boylan Avenue
Raleigh, North Carolina 27603

PHONE: (919) 755-6935

YEAR OF FUNDING: 3

FISCAL AGENCY: Wake County Public School System

DIRECTOR: Lanelle Taylor
OTHER STAFF TITLES: assessor/intervenor, infant/parent resource specialist, family counselor, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 high-risk infants birth to age 18 months (corrected for prematurity) and their families. Infants are premature, have been hospitalized in a neonatal intensive care unit for at least two weeks, and have not been diagnosed as having cerebral palsy or other serious brain damage. At least half of the children come from low-income families.

PROGRAM FOR CHILDREN:

The project follows the Assessment-as-Intervention model. Development is assess via observations by the parent and a professional; the assessment process becomes an intervention affecting a parent's child-rearing attitudes, beliefs, knowledge, and behavior. A series of ten assessment-intervention sessions are conducted, each followed by a session with a resource specialist who assists parents in planning appropriate parenting strategies for optimizing the child's development and locating materials and community services to implement the plan. The setting for interventions may shift from home to center, according to family preference.

MEASURES OF CHILD PROGRESS:

The Brazelton Neonatal Behavioral Assessment Scale is administered during the first three sessions. Two months after hospital discharge, the Bayley Scales of Infant Development is used. Measures of child behavior characteristics are examined at 12 and 18 months corrected age.

PROGRAM FOR PARENTS:

Parents serve as primary intervenors with their children and as evaluators of their own progress and of the overall program. Individual counseling is provided on request and parent support groups are available. The project measures outcomes of parents' attitudes, values, and beliefs about parenting and development; knowledge of infant development; parental control; and psychological well-being. Quality of interactions between parent and child is assessed at 12 and 18 months corrected age.

FEATURES AND PRODUCTS:

At least 15 public health nurses will be trained in the model. A resource room for families is available. Products being developed include: a videotape illustrating the assessment-intervention process; a book of materials for use with high-risk infants; a parent-infant curriculum coordinated with a nursing curriculum focusing on individual areas of child development and parent-child interactions; and a series of posters on early parenting and parent-child interaction.

VIPP Project

Volunteers in Partnership with Parents

ADDRESS: VIPP Project
210 W. Liberty
Williamston, North Carolina 27892

PHONE: (919) 792-6989

YEAR OF FUNDING: 3

FISCAL AGENCY: East Carolina University

DIRECTOR: Lynda Nelson
OTHER STAFF TITLES: head teacher, paraprofessional, parent and volunteer coordinator, clerk/typist, consultants (O.T., P.T., speech therapists)

CHARACTERISTICS OF TARGET POPULATION:

The project serves moderately and severely/profoundly retarded and multihandicapped children birth to age 6 years and their parents. The families live in a poor, rural area.

PROGRAM FOR CHILDREN:

The project offers services at home and in the center. Children under age 2 years participate in the home program, with weekly visits from VIPP staff. Children age 2 to 6 years attend the VIPP Project center three days weekly. A combination of a developmental and behaviorally implemented instructional approach is used. The teacher and paraprofessional have primary responsibility for direct intervention with children.

MEASURES OF CHILD PROGRESS:

Baseline information on the child is established during transdisciplinary assessment carried out by the staff at the Developmental Evaluation Clinic at the university. Follow-up evaluations are completed every 12 months. Criterion-referenced tools, including the Brigance Inventory of Early Intervention, are used for ongoing evaluation of the children's progress and to set appropriate learning goals.

PROGRAM FOR PARENTS:

Parents and their volunteer partners receive formal and informal instruction about normal child growth and development, behavior management, cognitively oriented stimulation activities, and caregiving skills. A parent and partner group meets monthly to provide emotional support, along with specific training in skills that foster a handicapped child's development. Individually designed parent-partner plans specify goals and objectives for parents and their partners to accomplish with the children.

FEATURES AND PRODUCTS:

A unique feature of this project is the use of family members or close friends to serve as "partners." These partners are trained along with the parents to provide support to the parent and quality respite care. The project plans to produce two documents, the VIPP Volunteer Handbook and a VIPP Implementation Manual, to provide information other rural early intervention projects will need in order to adopt the VIPP model.

A Social Communicative Intervention Model

ADDRESS: Children's Hospital Medical Center of Akron
281 Locust Street
Akron, Ohio 44308

PHONE: (216) 923-4535

YEAR OF FUNDING: 3

FISCAL AGENCY: Children's Hospital Medical Center

CO-DIRECTORS: Philippa Campbell, Jeanne Wilcox, and John Vollman
OTHER STAFF TITLES: parent/programming coordinator, psychologist, psychological assistant, speech and language pathologist, intervention coordinator, neurodevelopmental therapist, intervention specialists, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves term or near-term infants who have suffered from asphyxia with subsequent clinical evidence of hypoxic encephalopathy. Over the course of three years, the project will serve 30 children.

PROGRAM FOR CHILDREN:

The three-year curriculum has four phases and attempts to develop competence in social communication. Phase I, Primary Caregiver/Infant Interaction (one hour weekly, increased as needed), focuses on physical readiness for communication and play dialogue. Phase II, Intentional Nonverbal Communication (one hour four times weekly), attempts through individual and group treatments to help the child demonstrate nonverbal communication. Phase III, Initial Verbal (Symbolic) Intervention, attempts to establish a core vocabulary of ten symbols. Phase IV, Expanding Verbal (Symbolic) Skills, focuses on the establishment of multiword combinations.

MEASURES OF CHILD PROGRESS:

Videotapes of sessions are used to evaluate child behavior. Developmental assessments are conducted every six to 12 months using the Brazelton Neonatal Assessment Scales, the Bayley Scales of Infant Development, the Kent Infant Development (KID) Scale, and neurological and medical assessments.

PROGRAM FOR PARENTS:

The project develops individual family plans and tries, through training, to inform families about handicapping conditions and help parents be therapeutic agents, obtain services from outside agencies, and develop skills to cope with the stresses of rearing a handicapped child.

FEATURES AND PRODUCTS:

A close collaborative relationship with the neonatal intensive care unit will serve as a resource as the project attempts to develop, validate, and replicate an interagency service delivery model.

TEACH

Training and Educational Assistance for Children with Handicaps

ADDRESS: Southgate School
3041 Cleveland Avenue, S.W.
Canton, Ohio 44707

PHONE: (216) 484-2647
492-8185

YEAR OF FUNDING: 3

FISCAL AGENCY: Stark County Board of Mental Retardation and Developmental Disabilities

DIRECTOR: Joseph James
PROJECT MANAGER: Patrick R. Macke
OTHER STAFF TITLES: teacher, instructor assistants, language specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 95 preschool children birth to age 6 years who have substantial developmental disabilities according to the rules established by the Ohio Department of Mental Retardation and Developmental Disabilities.

PROGRAM FOR CHILDREN:

The project provides a comprehensive multidisciplinary program for handicapped preschool children in settings integrated with nonhandicapped peers. Infants and their parents receive one hour of training weekly, focusing on the sensorimotor development of the child. Toddlers attend a half-day integrated program based on the Uzgiris-Hunt Ordinal Scales of Psychological Development. The preschool program operates five days weekly during the regular school year and focuses on the development of skills that are critical to success in a mainstream environment. The children begin the program in self-contained classrooms located in a regular public school. Gradually, students are mainstreamed into existing classes for nonhandicapped children.

MEASURES OF CHILD PROGRESS:

The Early Learning Accomplishment Profile is used weekly to assess the progress of infants enrolled in the program. Toddler progress is determined daily using the Uzgiris-Hunt Ordinal Scales of Psychological Development. The progress of children enrolled in the preschool program is compared weekly against criterion-referenced measures. The children's growth in adaptive behavior is assessed using the Preschool Attainment Record and the Coping Analysis Schedule for Educational Settings.

PROGRAM FOR PARENTS:

Parents of children in the infant or toddler component are required to participate. Daytime respite care for children is provided so that parents can attend weekly workshops and training sessions, including a nine-month series on behavior management, social learning theory, human growth and development, and personal growth and development. Parents of children in the preschool component receive similar services, with the exception of respite care.

FEATURES AND PRODUCTS:

The project conducts community awareness and child identification programs.

Project Access

ADDRESS: Cincinnati Center for Developmental Disorders
Elland and Bethesda Avenues
Cincinnati, Ohio 45229

PHONE: (513) 559-4321

YEAR OF FUNDING: 2

FISCAL AGENCY: Cincinnati Center for Developmental Disorders

DIRECTOR: H. Jane Sites
OTHER STAFF TITLES: liaison special educator, communication specialist, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves abused and neglected children age 2 to 5 years who are suspected of having developmental disabilities. Each year staff screen 250 children; 100 to 150 children receive in-depth evaluations through local school and grant resources. Children with complicated developmental disabilities receive a comprehensive, longitudinal, multidisciplinary evaluation through referrals to local resources and the University Affiliated Cincinnati Center for Developmental Disorders.

PROGRAM FOR CHILDREN:

The project's goal is to develop an interdisciplinary educational intervention program to identify abused and neglected children who are developmentally disabled/learning impaired; develop remedial, individual education plans for these children; and provide access to educational placements to meet individual developmental needs. Most of the children are referred to appropriate community programs. Twenty-four children attend the Diagnostic Preschool where they are evaluated by a multidisciplinary team and receive language therapy and additional therapy as needed. The team reviews diagnostic status and trial treatment results biweekly. Findings are shared with the child welfare agency and parents or foster parents. The project offers local teachers and therapists in-service training on methods and objectives. Staff members visit the child's community placement for consultation and assessment of progress.

MEASURES OF CHILD PROGRESS:

The staff screen children with the Battelle Developmental Inventory. Children suspected of developmental delays are evaluated with psychoeducational, language, social-adaptive, and psychological measures such as the Preschool Language Scale, Sequenced Inventory of Communication Development, Brigance Inventory of Early Development, and Stanford-Binet Intelligence Scale. Pediatric, occupational/physical therapy, nursing, and other evaluations are available as needed.

PROGRAM FOR PARENTS:

During their child's enrollment in the Diagnostic Preschool, parents are offered individual or group social work treatment and behavior management counseling. All parents are counseled on the findings of developmental evaluations and on educational due process and placement procedures.

FEATURES AND PRODUCTS:

The project provides multidisciplinary in-service training to community agencies.

Remediating Social Deficits in Peer Interactions

ADDRESS: The Nisonger Center
Ohio State University
1580 Cannon Drive
Columbus, Ohio 43210

PHONE: (614) 422-2911

YEAR OF FUNDING: 2

FISCAL AGENCY: The Ohio State University

DIRECTOR: Michael J. Guralnick
COORDINATOR: Deborah C. Cochran
OTHER STAFF TITLES: curriculum specialist, intervention specialist, playgroup teacher

CHARACTERISTICS OF TARGET POPULATION:

The project will develop a model for enhancing peer interaction skills of developmentally delayed children age 3 to 5 years. The project provides services to approximately 24 children, their parents, and teaching staff. Children are selected from existing community programs on the basis of teacher recommendations, parent interviews, and classroom observations.

PROGRAM FOR CHILDREN:

Children participate in small playgroups that function as a setting for implementation, evaluation, and refinement of an assessment instrument and an intervention curriculum. The assessment instrument measures the use of appropriate affect, characteristic levels of play, range of communication skills, and specific social processes such as the initiation, maintenance, and termination of peer interactions. The curriculum presents detailed intervention strategies and procedures for matching those strategies to the assessed needs of individual children. Children participate in integrated early education classrooms as part of the intervention process.

MEASURES OF CHILD PROGRESS:

Child progress is measured by direct observation and ratings of accomplishment of specific goals identified through the assessment procedure. Indices of generalization and maintenance of acquired skills are evaluated periodically.

PROGRAM FOR PARENTS:

Assessment procedures address family interaction patterns, social networks, and overall family functioning. Strategies for expanding and strengthening the child's social network in the family and the community will be developed and implemented. Parents and siblings are encouraged to participate in a series of support group sessions.

FEATURES AND PRODUCTS:

An assessment system and curriculum for peer interaction skills and intervention strategies will be developed for use in early intervention programs. The project also provides technical assistance to staff in community settings.

Model Early Intervention Program to Develop a Linked Evaluation-Programming System

ADDRESS: Center on Human Development
University of Oregon
901 East 18th Avenue
Eugene, Oregon 97403

PHONE: (503) 686-3568

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Oregon

DIRECTOR: Diane Bricker
COORDINATOR: Kris Slentz
OTHER STAFF TITLES: teacher, parent specialist, teacher aide, evaluator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped infants and young children age 15 to 36 months. Each of two center-based classrooms enrolls ten to 13 handicapped children and four to five nonhandicapped children. The handicapped children demonstrate a range of impairments (mild to severe) and a variety of etiologies. The nonhandicapped children are at risk for medical reasons (by virtue of placement in a newborn intensive care unit) or for environmental reasons (as identified by a county welfare agency), or are siblings of participating handicapped children.

PROGRAM FOR CHILDREN:

Children are served in two center-based classrooms for three hours, four days weekly. Infants are served in weekly baby groups which are held at the center and which include their caregivers. The curriculum is based upon a behavioral-developmental philosophical orientation; an activity-based approach to instruction; and a strong linkage between assessment, intervention, and evaluation.

MEASURES OF CHILD PROGRESS:

The Gesell Developmental Scales are used as a standardized measure of child progress. The Evaluation and Programming System: For Infants and Young Children is the program relevant assessment/evaluation tool.

PROGRAM FOR PARENTS:

The project provides educational and support services to families. Flexible family involvement is emphasized, and participation is encouraged in the development of the individual education plan (IEP) and individual family involvement plans. Parent participation in the classroom is encouraged, and support activities and training at home are available. A Parent Survey, a Parent Self-Appraisal Inventory, a Weekly Parent Involvement Activity Log, and a Parent-Satisfaction Questionnaire are used to measure impact on families.

FEATURES AND PRODUCTS:

A comprehensive assessment-evaluation system is linked directly to the child's IEP and subsequent instructional programming.

Project ENTRANS

ADDRESS: Teaching Research Division
Oregon State System of Higher Education
345 North Monmouth Avenue
Monmouth, Oregon 97361

PHONE: (503) 838-1220
Ext. 401

YEAR OF FUNDING: 3

FISCAL AGENCY: Oregon State System of Higher Education, Teaching Research Division

DIRECTOR: Lynn Blair-Thomas
OTHER STAFF TITLES: teacher, program coordinators

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children age 4 to 5 years in the preschool program and three children age 5 to 7 years in the public school programs. The Crippled Children's Division diagnoses children who are developmentally disabled. Handicaps include severe, moderate, and mild retardation; multihandicaps; autism; emotional disturbance; and language delay. Three replication sites are involved in the project.

PROGRAM FOR CHILDREN:

In the planning phase the child's current developmental level is assessed and an individual plan is prepared. The intervention phase focuses on teaching skills in the preschool that will allow handicapped children to be integrated and maintained in the receiving classroom. Targeted skills may be worked on simultaneously in an integrated setting. The follow-up phase is aimed at maintenance of children in the receiving environment, with periodic assessment of the generalization of skills in the new setting and progress in all curricular areas. Teachers and aides receive training during the follow-up phase.

MEASURES OF CHILD PROGRESS:

Progress is measured in terms of the acquisition and generalization of trained skills within the preschool and the transitional environment. The Transition Skills Assessment is used in the fall and spring of the last preschool year and in the fall of the first public school placement. The Student Progress Record and the Vineland Social Maturity Scale are used to measure long-term progress.

PROGRAM FOR PARENTS:

The parent program trains parents in skills that will promote successful transition to the regular classroom. The project trains parents to teach their children transitional skills that are appropriate in the home and school, and to use generalization techniques and probes to facilitate generalization into the home. Staff members develop topical training materials that are specific to the needs of child and parent. Staff members also train siblings to provide models, use interactional techniques, and provide consequences to the child.

FEATURES AND PRODUCTS:

The project will develop a procedural and training manual to demonstrate an exemplary system for coordinating training and transitions with local education agencies. A resource guide to assist parents in the transition process also is being developed.

HAPPY

Helping Achieve Potential of Preschool Youngsters

ADDRESS: Project HAPPY
P. O. Box 328
Allentown, Pennsylvania 18105

PHONE: (215) 820-2076
820-2030
YEAR OF FUNDING: 3

FISCAL AGENCY: School District of the City of Allentown

DIRECTOR: Lillian M. Kerns
COORDINATOR: Kathleen A. Wilson
OTHER STAFF TITLES: master teacher, research assistant, aide, parent aide, psychologist, speech/language specialist, special educator

CHARACTERISTICS OF TARGET POPULATION:

The project serves mildly handicapped children age 4 to 5 years who have not yet entered school or who are newly enrolled in kindergarten. Handicaps may include learning disabilities, educable mental retardation, developmental and language delays, mild emotional disturbances, and social maladjustments. Services are focused on high-risk students who are culturally different or economically disadvantaged.

PROGRAM FOR CHILDREN:

Three classes operate weekdays for two and one-half hours. The program uses developmental and behavioral techniques with a curriculum/assessment linkage model. Objectives are based on needs identified using the criterion-referenced Uniform Performance Assessment Scale (UPAS) and are linked to the HI-COMP Curriculum. The curriculum emphasizes language and cognitive development.

MEASURES OF CHILD PROGRESS:

Potential students are screened with the Developmental Indicators of Learning--Revised. Children identified as having a potential problem are then given the Kaufman Assessment Battery for Children. The Uniform Performance Assessment Scale is used to generate curriculum objectives and to monitor progress over the course of the program. The Test of Early Language Development (TELD) and the Preschool Language Scale (PLS) also are used.

PROGRAM FOR PARENTS:

In-service training for parents is held monthly; transportation and child care are provided. Parents are encouraged to participate in the classroom and to observe classes through two-way mirrors. The project distributes a monthly newsletter for parents and operates a "make-and-take" parent drop-in center and a lending toy library.

FEATURES AND PRODUCTS:

The project has designed computer programs for efficient management, data collection, evaluation, and statistical analysis of test results. Products include a manual for screening clinics to identify at-risk children and a slidetape and a video program describing the project. Staff members also are developing questionnaires and needs assessment tools for Hispanic populations.

KIDS

Rural Kindergarten Indentification and Developmental Screening

ADDRESS: KIDS Project
313 West High Street
Ebensburg, Pennsylvania 15931

PHONE: (814) 472-9821

YEAR OF FUNDING: 3

FISCAL AGENCY: Pennsylvania Department of Education

DIRECTOR: William F. Ohrtman
COORDINATOR: Karen C. Morra
OTHER STAFF TITLES: master itinerant teachers

CHARACTERISTICS OF TARGET POPULATION:

Each spring, the project screens all children (in an eight-county rural area) who will enter kindergarten the following fall. A home-based program serves 44 at-risk children during the summer prior to their entrance into a regular kindergarten class. The project uses a consultant-teacher model to maintain these children in the regular kindergarten class during the school year.

PROGRAM FOR CHILDREN:

Children are screened and those suspected of having handicaps are assessed. Forty-four of the children are enrolled in a summer intervention program. At the end of the summer, children are screened again and special learning needs are identified. The project adapts the regular kindergarten curriculum to meet the special needs of each child. All children are mainstreamed into regular kindergarten classes. A follow-up progress assessment is carried out. The summer program is home based and trains the kindergarten teacher, the parent, and other school personnel to work together to prepare the child for kindergarten.

MEASURES OF CHILD PROGRESS:

The ABC Inventory and Developmental Programming for Infants and Young Children are used for screening and to measure child performance.

PROGRAM FOR PARENTS:

Parents attend workshops, receive training, actively participate in instructing their at-risk preschoolers, help to develop materials, and evaluate the program.

FEATURES AND PRODUCTS:

With the assistance of Fred Rogers of "Mister Rogers' Neighborhood" and Family Communications, Inc., the project will develop a videotape training series for parents and teachers of at-risk children. The videotapes will focus on the summer home program, including parent participation, as well as the kindergarten year intervention program.

PATT

Parent and Toddler Training

ADDRESS: Western Pennsylvania School for Blind Children
201 North Bellefield Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 621-0100

YEAR OF FUNDING: 3

FISCAL AGENCY: Western Pennsylvania School for Blind Children

DIRECTOR: Vince b. Van Hasselt
OTHER STAFF TITLES: social worker, child specialists, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves visually impaired and multihandicapped infants and toddlers birth to age 3 years and their families. The major eligibility criterion is legal blindness or suspected legal blindness as determined through ophthalmologic evaluations. A minimum of 30 families will participate in PATT.

PROGRAM:

Emphasis is placed on teaching parents methods of enhancing optimal social responsiveness from their visually handicapped infants. Parents are trained in the use of specific strategies for effective caregiving, play and infant stimulation techniques, behavior management, and communication and problem-solving skills. The project networks with community-based programs for comprehensive infant services as well as supplementary services for families.

MEASURES OF PROGRESS:

Assessment instruments are administered prior to intervention, immediately following intervention, and at six and 12 months following intervention. To assess child progress, the project uses the Vision-Up Assessment, the Adaptive Performance Instrument, the Carey Infant/Toddler Temperament Scale, videotaped Behavior Observations of Parent-Infant Interactions, and periodic evaluations by a physical therapist and an occupational therapist. To assess parent progress, the project uses the Locke-Wallace Marital Satisfaction Scale, the Beck Depression Inventory, the Hopkins Symptoms Checklist, the Questionnaire on Resources and Stress, the Minnesota Multiphasic Personality Inventory, and the Home Observation for Measurement of the Environment Inventory. To measure the progress of siblings, the project uses the Child Behavior Profile and the Youth Self-Report Inventory.

PROGRAM FOR PARENTS:

Project PATT offers a 24-week intervention program consisting of weekly two-hour meetings at the center. The program educates the parents about the nature of the child's handicapping condition, its impact on growth and development, and its influence on the family.

FEATURES AND PRODUCTS:

The family, including nonhandicapped siblings, participate directly in project activities. The project uses a standardized curriculum that is replicable in other settings; a skills-oriented program to teach parents strategies for problem areas; post-intervention booster sessions to facilitate the maintenance of gains; and an evaluation of the progress of all participants. One replication site is presently using components of the model.

PREP

Preparation for Regular Education Placement

ADDRESS: Western Psychiatric Institute and Clinic
3811 O'Hara Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 624-1703

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Pittsburgh

DIRECTOR: Scott McConnell
OTHER STAFF TITLES: project coordinator, classroom teachers, aides, secretary

CHARACTERISTICS OF TARGET POPULATION:

This project provides services to eight children age 3 to 5 years who demonstrate significantly deviant and maladaptive behavior patterns in a wide variety of settings and, as a result, are not expected to benefit from regular kindergarten without preliminary treatment and preparation. The project also serves six nonhandicapped preschoolers.

PROGRAM FOR CHILDREN:

PREP offers a classroom-based comprehensive preschool model, integrating behavior-disordered and nonhandicapped children. Individual education plans are developed for both groups of children. The curriculum has three interrelated modules: 1) systematic programming for the reduction of deviant or maladaptive behavior patterns, 2) generic and individualized social and academic survival skills training, and 3) instruction in preacademic and early academic skills. Handicapped children learn social and academic survival skills related to successful placement in regular education settings.

MEASURES OF CHILD PROGRESS:

Child progress is measured by direct observation of social interaction and classroom performance using observational scales developed by the project. Preacademic skills are assessed with various criterion-referenced measures, including the Learning Accomplishment Profile, Monitoring Achievement in Pittsburgh Mathematics and Reading, and the Classroom Survival Skills Checklist. Normative assessments of academic achievement and behavioral adjustment are completed with the California Achievement Test, the Child Behavior Checklist, and the Walker Problem Behavior Identification Checklist.

PROGRAM FOR PARENTS:

Orientation presentations provide parents with a conceptual understanding of the program's focus and a common vocabulary for further discussion and participation. Parents later are trained in the management of their children's behavior, child advocacy, and participation in the classroom model.

FEATURES AND PRODUCTS:

The project emphasizes both early intervention and programming for transition to regular education placements. Transition programming includes requisite basic skills, assessment of behavioral standards in the next settings, and instruction to meet these standards. The project will develop instruments and manuals for the assessment of future educational placements, academic and social behavior curriculum materials, and written and audiovisual materials describing the program.

Project Link for Neonates At Risk

ADDRESS: United Cerebral Palsy of Northeastern Pennsylvania
230 Lackawanna Avenue
Scranton, Pennsylvania 18503

PHONE: (717) 343-0929

YEAR OF FUNDING: 3

FISCAL AGENCY: United Cerebral Palsy of Northeastern Pennsylvania

DIRECTOR: Cyrilla Breslin
OTHER STAFF TITLES: educator, case manager, occupational therapist, physical therapist, speech therapist, consultant developmental psychologist, consultant developmental pediatrician

CHARACTERISTICS OF TARGET POPULATION:

The project serves infants who are at-risk for developmental disabilities and their families. All infants served are referred by the staff of the regional neonatal intensive care unit.

PROGRAM FOR CHILDREN:

The program uses a transdisciplinary service delivery system in a home-based setting with guidance from an early intervention specialist. Developmental goals are set for each child based on analysis of videotaped behavior samples.

MEASURES OF CHILD PROGRESS:

The Bayley Scales of Infant Development and the Adaptive Behavior Scale for Infants (ABSI) are administered at the child's entry into and exit from the program. The Early Intervention Developmental Profile is scored with the videotaped behavior sample and every six months thereafter. Children with identified handicaps are referred to a community-based early intervention program.

PROGRAM FOR PARENTS:

Families are visited twice monthly for an evaluation of their children's developmental progress. Specific recommendations are made for using or changing the child's environment to enhance development, and handling and positioning techniques are demonstrated. Parents receive information on growth and development and are referred to other services as needed. Monthly parent support and education meetings are held.

FEATURES AND PRODUCTS:

The project uses videotaped development assessments to plan intervention for developmentally at-risk infants. The project has developed a lending library list. Existing infant curricula have been adapted so that educational/therapeutic interventions are centered around normal care-giving times of the day.

ETIPS

Educational Television Intervention Programs

ADDRESS: Department of Curriculum and Instruction
Special Education Programs
Box 5074
Cookeville, Tennessee 38505

PHONE: (615) 528-3531

YEAR OF FUNDING: 2

FISCAL AGENCY: Tennessee Technological University

CO-DIRECTORS: Rhonda Folio and Dean Richey
OTHER STAFF TITLES: evaluation specialist, interagency liaison, secretary, model parent group, TV producer/director, project coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children age 6 to 24 months and their parents or caregivers who live in rural, isolated areas. Twenty of the children are handicapped; five are at-risk.

PROGRAM FOR CHILDREN:

The project is developing, testing, implementing, and evaluating 30 15-minute instructional television programs to help parents and other adults identify, facilitate, and monitor the progress of their handicapped infants and toddlers. The programs focus on motor-adaptive skills and cognitive/language skills. Several existing assessment/intervention instruments, including the Peabody Developmental Motor Scales and Activity Cards, the Uzgiris-Hunt Ordinal Scales of Psychological Development, and the Portage Guide to Early Education, are used as a basis for the content of the programs. Parent packets and guides accompany each broadcast. The project also fosters positive attitudes related to mainstreaming.

MEASURES OF CHILD PROGRESS:

Each child is tested using the instruments listed above. The information from these assessments is used to develop individual education plans and serves as baseline data for child progress. At the end of the first phase, a reassessment will indicate changes in the children's abilities.

PROGRAM FOR PARENTS:

Staff members contact parents weekly. Parent groups meet monthly to provide support and motivation. Parents document their own progress by using check sheets which accompany each broadcast. Staff members observe parents at home and help them work with their children.

FEATURES AND PRODUCTS:

At least two classes of high school students, as future parents, view the telelessons. The project publishes a newsletter documenting its activities.

Southern Appalachian Early Intervention Program

ADDRESS: P. O. Box 18940A
East Tennessee State University
Johnson City, Tennessee 37614

PHONE: (615) 929-4439
929-4900

YEAR OF FUNDING: 1

FISCAL AGENCY: East Tennessee State University

DIRECTOR: Wesley Brown
COORDINATOR: Linda Keller
OTHER STAFF TITLES: educational facilitator, speech and language facilitator, coordinator of parent education, medical coordinator, motor development specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves moderately to severely handicapped children birth to age three years who reside in the suburban and rural counties of northeast Tennessee.

PROGRAM FOR CHILDREN:

The project provides educational services in the on-campus center or at the rural contact centers. Following assessment of the child's needs, the parents and project staff meet to form an Individual Development Plan which includes plans for both center-based and at-home activities. Each child is assigned a project facilitator who coordinates and monitors services received from a transdisciplinary team. Curricula used in the center-based program include the Program Guide for Infants and Toddlers with Neuromotor and Other Developmental Disabilities, the Behavioral Repertoire for Handicapped Infants, and Developmental Programming for Infants and Young Children. Home-based activities focus on stimulation, movement, sensory-motor activities, and pre-speech activities. Staff members model activities for parents to carry out at home.

MEASURES OF CHILD PROGRESS:

All children are assessed quarterly to monitor their progress toward cognitive, motor, social, communication, and self-help skill goals.

PROGRAM FOR PARENTS:

Parents participate in the assessment process, the development of an Individual Development Plan, and in the day-to-day implementation of recommended therapeutic interventions. The project offers three levels of parent training. The first stage takes place upon admission to the program and provides support for bridging the child's entry into the program. The second level focuses on techniques and activities which the parent should employ at home. The third level deals with parenting techniques. The project also organizes parent support groups, and includes parents on the advisory council.

FEATURES AND PRODUCTS:

The project will compile a computerized data base of all local services in the region which can be accessed to determine the most appropriate placement for children living in this very rural area. The project puts out a slide/tape program and publishes easy-to-read brochures for parents.

Infant/Toddler Learning Project

ADDRESS: Peabody College
MRL Building
Department of Special Education
P. O. Box 328
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8277

YEAR OF FUNDING: 3

FISCAL AGENCY: Vanderbilt University, Peabody College

COORDINATOR: Cathy Alpert
OTHER STAFF TITLES: project evaluator, physical therapist, parent trainer, classroom coordinator, teacher trainer, communications specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves severely handicapped infants birth to age 3 years. To be eligible for the program, the child's developmental status must be at a level below age 15 months as indicated by standardized infant assessments. Preference is given to neurologically impaired children and children with multiple handicaps.

PROGRAM FOR CHILDREN:

The center-based program is based on the principles of environmental design and demonstrates a transdisciplinary approach. Microcomputer technology helps staff members make decisions, plan curricula, prepare individual education plans (IEP), and collect and analyze data. The curriculum embodies the concepts and practices associated with incidental teaching and the Individualized Curriculum Sequencing model.

MEASURES OF CHILD PROGRESS:

Initial assessment of children is accomplished with the Bayley Scales of Infant Development, Assessment in Infancy: Ordinal Scales of Psychological Development, and therapy evaluations. Child progress is measured by standard developmental scales, evaluation of the IEP, and evaluation of individual learning programs using the AIMSTAR microcomputer program.

PROGRAM FOR PARENTS:

The program for parents is based on the needs and dynamics of each family situation. Support services include: home visits by project staff, management and treatment skills, environmental arrangement in the home, stress and time management, identification of support networks, support groups, classroom participation, and other services.

FEATURES AND PRODUCTS:

The model emphasizes the design and implementation of an optimal learning environment for early intervention. The center-based program is cost-effective and demonstrates replicable procedures for maximizing children's learning in community settings.

Preschool Orientation and Mobility Project

ADDRESS: Preschool Orientation and Mobility Project
Box 328
Peabody College
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8164
322-8182

YEAR OF FUNDING: 2

FISCAL AGENCY: Vanderbilt University

DIRECTOR: Everett W. Hill
OTHER STAFF TITLES: preschool teacher, orientation and mobility (O&M) specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves visually impaired and/or handicapped children birth to age 5 years and their parents. Visual impairment is difficult to ascertain in extremely young children. Therefore, the project also serves children suspected of having severe visual problems.

PROGRAM FOR CHILDREN:

The project identifies and integrates orientation and mobility (O&M) skills with early intervention services. The curriculum covers developmental areas of cognition, language, motor skills, socialization, and self-help, with an emphasis on the development and integration of age-appropriate O&M skills (movement, posture, concept of space, and perceptual motor functioning). A four-day classroom program is provided for children age 2 to 5 years, and home visits are made twice monthly. For children birth to age 5 years, home-based parent training is available. Each parent and child receives a weekly home visit of one and one-half hours. Group experiences are provided twice monthly. The project also operates a monthly Resource Center Clinic, which provides assessment and parent consultation services for visually impaired preschoolers, their families, and teachers.

MEASURES OF CHILD PROGRESS:

Each child receives a functional vision assessment and a comprehensive initial assessment using standardized instruments and developmental inventories. Children will receive both a developmental and an O&M assessment to determine specific needs.

PROGRAM FOR PARENTS:

Parents develop their own parent education plan (PEP). Based on the PEPs, project staff plan individual and group parent training sessions, facilitate the development of parent support groups, and help parents obtain ancillary support services.

FEATURES AND PRODUCTS:

The project will develop an O&M curriculum, assessment strategies, and parent education procedures. The project also will determine the feasibility of using technology (electronic mobility devices and microcomputers) to supplement intervention.

Early Childhood Day Care Project

ADDRESS: Region XIX Education Service
Special Education Department
P. O. Box 10716
El Paso, Texas 79997

PHONE: (915) 593-5081

YEAR OF FUNDING: 2

FISCAL AGENCY: Region XIX Education Service Center

DIRECTOR: James Mancill
COORDINATOR: Frank Castillo
OTHER STAFF TITLES: paraprofessional day-care aides, clerk typist

CHARACTERISTICS OF TARGET POPULATION:

The model helps integrate handicapped children into the mainstream of society by increasing the quality and availability of day-care services. The project serves about 30 handicapped children birth to age 3 years; severely and multihandicapped children are given priority.

MEASURES OF CHILD PROGRESS:

Product, process, and implementation evaluations are used to indicate program objectives, collect data, and document major program modifications. Written documentation and oral reporting procedures are used to set priorities based upon needs assessment and the review of each staff member's performance in terms of the accomplishment of established program objectives and activities.

PROGRAM FOR PARENTS:

The project coordinator arranges individual consultation concerning separation anxiety, child safety, child care, and acceptance of the child by others. The project and participating sites develop ongoing parent support groups which are open to parents of handicapped and nonhandicapped infants. A parent network encourages mutual support (baby-sitting, exchanging information, emotional support).

FEATURES AND PRODUCTS:

The model will demonstrate the feasibility of providing day care to handicapped children, enhance the children's achievement of developmental milestones, and maintain the integrity of the family by giving parents the opportunity to pursue economic, social, and personal interests. The project focuses on mainstreaming the handicapped child. A rating scale will be developed to evaluate training topics, parents' attitudes toward the consultant and day-care staff, and day-care staff attitudes about the parents. A behavior evaluation will also be developed to evaluate attitudes and feelings of parents of nonhandicapped children who attend day-care centers with handicapped children. A project manual will be developed.

Single Parent Project

ADDRESS: Infant Programs
3313 Richmond Avenue
Houston, Texas 77098

PHONE: (713) 521-9584

YEAR OF FUNDING: 2

FISCAL AGENCY: Mental Health, Mental Retardation Authority of Harris County

DIRECTOR: Marlene Hollier
COORDINATOR: Sandra Collins
OTHER STAFF TITLES: parent trainer/resource coordinator, teacher, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves developmentally delayed children birth to age 3 years from single-parent families. Parent eligibility is based on parents' economic and social stress levels. The project serves 15 children and their parents.

PROGRAM FOR CHILDREN:

The format and frequency of services to children vary according to parental and child needs. Available services include home visits or center-based inverventions, and monthly group classes at variable hours, including weekends. The class focuses on helping the parent become involved with the child at the parent's individual level of readiness. The teacher models appropriate nurturing, positioning and handling, and teaching techniques based on the Infant Programs Birth-to-Three Curriculum.

MEASURES OF CHILD PROGRESS:

Child progress toward individual education plan (IEP) goals is measured quarterly. The Infant Programs Birth-to-Three Curriculum Baseline is administered annually and updated quarterly as a measure of child progress. A standard developmental instrument, such as the Bayley Scales of Infant Development, is administered yearly.

PROGRAM FOR PARENTS:

The parent and parent trainer develop a parent program plan (PPP) based on a comprehensive needs assessment. PPPs are evaluated quarterly. Parent training includes parenting skills, assertiveness training, time and money management, recognizing and building strengths in single-parent families, and "surviving alone" workshops. Information on financial assistance, housing, and employment also is offered, and parent support groups are formed as needed.

FEATURES AND PRODUCTS:

The project will publish the Single Parent Resource Handbook for the Houston/Harris County area. This handbook will include training materials and information relevant to the single parent of a young handicapped child. The project also will publish a collection of training materials not limited to the Houston/Harris County area for professionals working with the single parent.

Functional Mainstreaming for Success

ADDRESS: Developmental Center for Handicapped Persons
Utah State University
UMC 6800
Logan, Utah 84322-6800

PHONE: (801) 750-1985

YEAR OF FUNDING: 2

FISCAL AGENCY: Utah State University

DIRECTOR: Sebastian Striefel
CO-DIRECTOR: John Killoran
COORDINATOR: Maria Quintero
OTHER STAFF TITLES: graduate assistants, secretary, consultant

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 30 moderately to severely handicapped children age 3 to 6 years. The children have a variety of handicapping conditions, including mental retardation, emotional disturbance, behavior disorder, developmental delay, and sensory and motor impairments.

PROGRAM FOR CHILDREN:

The project provides instructional and social mainstreaming of handicapped children with 60 nonhandicapped peers. Procedures are developed to 1) identify teacher expectations, child training needs, and teacher assistance and support needs before and during mainstreaming; 2) determine the integration activities appropriate for each child; 3) provide activities for functional grouping of handicapped and nonhandicapped peers; and 4) prepare children, families, and staff for mainstreaming. The project has operated three preschool classrooms with a 50:50 ratio of handicapped and nonhandicapped children. Other mainstreaming activities include reverse mainstreaming and buddy systems in preschool, kindergarten, and first grade classrooms.

MEASURES OF CHILD PROGRESS:

Progress toward individually specified goals and objectives, standardized instruments selected by the individual child's study team, and direct observational measures on social interactions are used to document progress. Additional measures of staff, parent, and child satisfaction are used.

PROGRAM FOR PARENTS:

The project has developed materials that address school policies, myths and realities of handicapping conditions, and the legal and educational rationale for mainstreaming. Parent satisfaction is measured biannually. Parents help develop individual education plans, advocate for their child, and facilitate generalization of skills.

FEATURES AND PRODUCTS:

The project has developed a slide-tape show that describes the project; several reviews of the literature in areas pertinent to mainstreaming; and instruments to assess teacher expectations and child skills, parent concerns, and environmental demands and limitations. Peer preparation activities, including puppetry and role play, are being developed. All materials and procedures will be compiled into a project manual for dissemination and replication.

HI TECH

ADDRESS: Outreach and Development Division
Developmental Center for
Handicapped Persons
Utah State University
Logan, Utah 84322-6805

PHONE: (801) 750-1991

YEAR OF FUNDING: 2

FISCAL AGENCY: Utah State University

DIRECTORS: Joseph Stowitschek and Sarah Rule
COORDINATOR: Sharman Pitcher
OTHER STAFF TITLES: model site manager, model site teacher, instructional programmer

CHARACTERISTICS OF TARGET POPULATION:

The project will serve approximately 45 children age 2 to 6 years who meet eligibility criteria for developmental disabilities and who have no physical and/or sensory impairments that would prevent their participation in an integrated preschool. All children have mild to severe impairments in cognitive functioning and other areas.

PROGRAM FOR CHILDREN:

Mainstream and center-based programs are the primary demonstration sites. The initial demonstration site serves approximately 20 nonhandicapped and five handicapped children. Handicapped children are integrated into regularly scheduled activities supplemented with microsessions and co-incidental teaching sessions. Individual education plans are developed using CAMS (Curriculum and Monitoring System). Ongoing training, program monitoring, and follow-up for preschools in rural areas are conducted using a combination of telecommunication modes.

MEASURES OF CHILD PROGRESS:

Norm- and criterion-referenced assessments are used for program development and evaluation. Normative tests of intelligence, selected according to the child's age, include the McCarthy Scales of Children's Abilities, the Stanford-Binet Intelligence Scale, and the Bayley Scales of Infant Development. The Brigance Inventory of Early Development is used for criterion-referenced measurement.

PROGRAM FOR PARENTS:

Parents are involved in parent training programs, volunteer assistance (such as the Advisory Committee) in-home assistance, and child advocacy.

FEATURES AND PRODUCTS:

The primary goal of the project is to develop, test, and disseminate a telecommunications support model to teachers of handicapped children in both integrated and self-contained programs. Three telecommunication modes (two-way audio, two-way audio/video, two-way computer) and three modes of support for teachers (training and feedback, training of a supervisor, and consultation from specialists) will be evaluated.

PTP

Preschool Transition Project

ADDRESS: Outreach and Development Division
Developmental Center for Handicapped Persons
Utah State University
UMC 68
Logan, Utah 84322-6805

PHONE: (801) 750-1991

YEAR OF FUNDING: 2

FISCAL AGENCY: Utah State University

CO-DIRECTORS: Sarah Rule and Joseph Stowitschek
COORDINATOR: Mark Innocenti
OTHER STAFF TITLES: co-investigator, teacher, secretary, data collectors

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children age 4 to 5 years who are eligible for school placement the following school year and who demonstrate a mental age delay of at least one year and a year or more delay in at least one skill area, such as language or self-care. Approximately 25 children will be served.

PROGRAM FOR CHILDREN:

The purpose of the project is to develop a model to prepare handicapped children for successful mainstreaming at the kindergarten and elementary levels. The model has four components: 1) child preparation, which occurs in a mainstream preschool and develops children's learning strategies, social skills, and academic skills in formats that approximate kindergarten and elementary school; 2) information transfer, which facilitates administrative transfer of records; 3) placement, which teaches parents to act as advocates to secure mainstream placements; and 4) follow-up, which ensures that the mainstream teachers receive support, training, and pertinent information about the mainstreamed child.

MEASURES OF CHILD PROGRESS:

Measures of child progress include either the Stanford-Binet Intelligence Scale or the McCarthy Scales of Children's Abilities; criterion-referenced testing based on the Brigance Inventory of Early Development; and an evaluation procedure which accompanies the Let's Be Social program.

PROGRAM FOR PARENTS:

In addition to development of individual education plans (IEP), parents of children in the transition program are involved in teaching social skills to their children at home, and acting as transition agents. The Let's Be Social Home program is used in training parents to teach social skills. Meetings are held to inform parents about the transition process and to teach them how to be advocates for their children.

FEATURES AND PRODUCTS:

Procedural manuals, Parents' Manual, and Skills for School Success (a curriculum to teach children to work in a variety of classroom situations) will be available during the third year.

SPCTRM

Special Programs for Children of Teenage Non-Relinquishing Mothers

ADDRESS: Washington Alternative High School
3279 Washington Boulevard
Ogden, Utah 84401

PHONE: (801) 393-7154

YEAR OF FUNDING: 3

FISCAL AGENCY: Utah State University

DIRECTOR: Helen D. Mitchell
COORDINATOR: Vicky Hoagland
OTHER STAFF TITLES: parent trainer, intervention specialist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project's model serves 20 children birth to age 3 years who show evidence of developmental delay or are identified as high risk for developmental delay. The children's adolescent mothers are also served.

PROGRAM FOR CHILDREN:

The project monitors a day-care program at an alternative high school with mothers as primary intervention agents. Staff members conduct a comprehensive assessment of each child, then specify developmentally sequenced training activities to be used by each mother to improve her child's skills. The Curriculum and Monitoring System (CAMS), the Portage Guide to Early Education, Developmental Programming for Infants and Young Children, and Small Wonder curricula are used.

MEASURES OF CHILD PROGRESS:

Children are screened using the Bayley Scales of Infant Development. Each child identified as having a significant developmental delay is administered the appropriate placement tests from CAMS. At the end of the year, the same tests are administered to monitor child progress. Observational data are collected weekly and are analyzed using a multiple baseline approach.

PROGRAM FOR PARENTS:

Adolescent parents are observed with their children daily. Monthly home visits provide each mother supportive counseling to achieve educational, vocational, and other personal goals. The project offers mothers a weekly support group and a child development class. The project also offers a "Mothers Night Out" program. Credit toward high school graduation is given for participation in the project.

FEATURES AND PRODUCTS:

The project has developed The Infant Child Resource Manual, a guideline for the young mothers; The Adolescent Parent Support Group Manual, designed as a model for conducting support groups; and a Community Resource Manual, listing services available in the Odgen area for the young mothers.

TEEM

Transitioning from Early Education into the Elementary School Mainstream

ADDRESS: Center for Developmental Disabilities
499C Waterman Building
University of Vermont
Burlington, Vermont 05405

PHONE: (802) 656-4031

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Vermont

DIRECTOR: Wayne L. Fox
COORDINATORS: Michael Conn-Powers and Jacqueline Thousand
OTHER STAFF TITLES: community resource specialist

CHARACTERISTICS OF TARGET POPULATION:

The project is designed to provide training and technical assistance to public school personnel providing educational services to handicapped preschoolers in 18 rural elementary schools. These personnel include Essential Early Education (EEE), kindergarten, and first grade teachers; elementary special education staff; and administrators.

PROGRAM:

The goal of the project is to assist local elementary schools in establishing and implementing procedures for transitioning young children with handicaps from EEE programs into the local elementary school mainstream. In order to accomplish this goal, the project is involved in two sets of activities: (1) developing a model for transitioning that can be incorporated into the local elementary school system; and (2) providing training and technical assistance to the public school personnel to enable them to adapt and adopt this model. The transition model includes preparation of the child and the local elementary school for transitioning and a system for monitoring and remediating the child's participation in the elementary school mainstream. The project's training and technical assistance activities are designed to promote involvement of all elementary school personnel, development of administrative policies and procedures, and establishment of a cooperative transition planning team. Parents are involved as members of the transition planning team and are provided opportunities for participating in the development and implementation of their child's transition plan.

EVALUATION:

Program success will be based upon two measures: the degree to which local elementary schools establish and implement a model for transitioning, and the impact of the transition model upon the children and families involved. Instruments and procedures are being developed to measure specific indicators of program success, such as the amount of transition planning in the family and the school, and the amount of satisfaction with the transition process.

FEATURES AND PRODUCTS:

The project will develop a manual to assist early childhood special education programs and local elementary schools in establishing policies and procedures for transitioning young children with handicaps. The manual also will include sample instruments and procedures for implementing specific transition activities, such as assessment tools for identifying skill and instructional demands of the elementary school setting.

Project Cope

ADDRESS: The Children's Center
507 Third Avenue
Franklin, Virginia 23851

PHONE: (804) 562-6806

YEAR OF FUNDING: 3

FISCAL AGENCY: The Children's Center

DIRECTOR: Barbara S. Mease
OTHER STAFF TITLES: infant education specialist, pediatric nurse, physical therapist, speech therapist, day care teacher, case manager, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 developmentally disabled or chronically ill infants birth to age 2 years and 10 chronically ill children age 3 to 8 years. Sixty percent of the children are from low-income families; 50 percent live in sparsely populated rural areas; 23 percent of the mothers are teenagers; and 50 percent of the infants served represent racial minority groups.

PROGRAM FOR CHILDREN:

A combination of home- and center-based services is provided. Parents who so choose have the option of placing their child in a mainstream child-care center. Activities include supervised free play, crafts, movement, singing, story telling, and outside play. In-service training and technical assistance are provided to teachers of the school-aged children.

MEASURES OF CHILD PROGRESS:

Children are assessed using the Receptive-Expressive Emergent Language Scale, the Early Learning Accomplishment Profile, the Uzgiris-Hunt Ordinal Scales of Psychological Development, the Milani-Comparetti Motor Development Screening Test, and a physical assessment tool.

PROGRAM FOR PARENTS:

Project staff members encourage parents to observe their children's interactions with other children. Center-based respite care is available to parents. Parents attend weekly training sessions where the case manager introduces new activities and discusses the child's interactions at the center. Parent satisfaction is measured by questionnaires.

FEATURES AND PRODUCTS:

Products being developed include a directory of organizations serving developmentally disabled children and their families; a manual of nursing strategies for chronically ill children; a tool for assessing parenting skills related to health issues; and an annotated bibliography on pamphlets and brochures concerning chronic conditions. The project also has developed workshops on leading an effective case conference and health issues in day care.

Parent-to-Parent Monitoring Project

ADDRESS: Parent Education and Monitoring Project
1314 West Main Street
Richmond, Virginia 23284

PHONE: (804) 257-1851

YEAR OF FUNDING: 2

FISCAL AGENCY: Virginia Commonwealth University

DIRECTOR: Mary Beth Bruder
COORDINATOR: Margaret Aunins
OTHER STAFF TITLES: parent educators, graduate assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves infants birth to age 2 years who have received care in the local neonatal intensive care unit, infants whose mothers were under age 17 years at the infant's birth, and infants whose mothers have limited abilities (MH-MR). About 300 infants and families are eligible for services; 150 will participate each year.

PROGRAM FOR CHILDREN:

The project serves children indirectly through a comprehensive program of services to families. Parents may choose to participate in any or all of the components. The first component monitors at-risk infants. A staff member visits the home of an at-risk infant to provide developmental and community resource information to parents immediately after their newborn is discharged from the hospital. Visits occur every three months until the infant is age 2 years. The second component is a bimonthly parent-baby group offering education and support to parents of at-risk and delayed infants. In the third component, a small group of parents is trained to implement the first two components.

MEASURES OF CHILD PROGRESS

Measures of child progress, administered initially, annually, and/or at termination, include the Bayley Scales of Infant Development, the Battelle Developmental Inventory, and the Carolina Record of Infant Behavior. An adapted version of the Denver P.D.Q. is used every three months to monitor development.

PROGRAM FOR PARENTS:

Effectiveness of services to parents is documented by a parents' need inventory, stress and support scales (A.F.I.L.E. and F.I.R.M.), parents' knowledge of child development, parent satisfaction measures, the Home Observation for Measurement of the Environment, Field's Face-to-Face Interaction Scales, the Broussard Neonatal Perception Inventory, and the Nowicki-Strickland Locus of Control. Other formative measures are used with parents participating in Components 2 and 3.

FEATURES AND PRODUCTS:

A resource guide of services for young children and a procedural manual, including training materials, are available. The project is facilitating both an interagency coordinating task force of the existing infant programs in Richmond, and an evaluation consortium of regional infant programs.

Bright Beginnings

ADDRESS: Matthew Whaley School
Scotland Street
Williamsburg, Virginia 23185

PHONE: (804) 220-3397

YEAR OF FUNDING: 3

FISCAL AGENCY: Williamsburg-James City County Public School
CO-SPONSOR: Child Development Resources

CO-DIRECTORS: Carol Beers and Corinne Garland
COORDINATOR: Jerri Millican
OTHER STAFF TITLES: child/family development specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 80 children birth to age 5 years who are at risk for school failure. Risk factors are compiled based on a family needs assessment and other appropriate assessments. Staff members then determine, based on risk factors, the category of services that the child and family receive.

PROGRAM FOR CHILDREN:

Children in Category I are referred to appropriate community resources, may receive developmental monitoring in other placements, and are rescreened every three to six months. Children and their families in Categories II and III may participate in Sharing Centers, home visits, parent education groups, and language groups. In Category III, children birth to age 2 years receive weekly home visits. Children age 2 to 5 years may attend a transition classroom three times weekly. The classroom uses the High Scope Curriculum and the Developmental Language Approach. Activities which foster positive interactions between parent and child are stressed at home visits and in the Sharing Center.

PROGRAM FOR PARENTS:

An individual family plan is developed by parents and project staff. Parents sign an agreement as part of the enrollment process and must participate in Sharing Centers. Parents must participate in the classroom and may serve on the advisory council.

FEATURES AND PRODUCTS:

The project represents the coordinated efforts of the Williamsburg-James City County Public Schools and Child Development Resources, a private nonprofit agency serving handicapped and developmentally delayed children birth to age 2 years and their families. A brochure has been developed that describes local programs serving young children. Transition activities have been developed to ensure a smooth transition for the children as they move from one program to the other. A parent and child expectation checklist, an at-risk factor checklist, and a family needs assessment have been developed.

CAP Project

Computer-Assisted Program

ADDRESS: Experimental Education Unit
University of Washington WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Susan Sandall
OTHER STAFF TITLES: occupational therapist, teacher, communication disorders specialist, computer programmer, materials specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves underserved families, their young handicapped children birth to age 3 years, and the agencies that serve them. Twenty children are served in the center-based program, and 50 children are served in the field-based program. Children are cognitively delayed, visually impaired, and deaf-blind.

PROGRAM FOR CHILDREN:

Comprehensive programming is provided, and instructional activities are suggested for home implementation. Activities that are identified and tested with center-based families become the basis for a computerized procedure for selecting activities that meet the needs of the field-based children. The parents of the field-based children assess their children and implement activities designed to fit into the family's daily routine.

MEASURES OF CHILD PROGRESS:

The project has adapted the Early Intervention Developmental Profile for parents to use to assess children upon entry into the program and at three-month intervals. A standardized measure is also used at six- or 12-month intervals. Staff members collect weekly progress records for center-based children and monitor the progress of field-based children by telephone.

PROGRAM FOR PARENTS:

Parents in the center- and field-based components are actively involved in their children's educational and therapeutic program. A parent support group is offered for parents of children in the center program. A parent network provides peer support (via letters and telephone calls) to field-based parents. Staff members help parents in the field-based component find services in their local areas.

FEATURES AND PRODUCTS:

The project provides individualized programs for families who lack access to local services. Staff members are developing software for the generation of individualized educational and therapeutic programs for children birth to age 3 years.

Coordinated Service Delivery for Young Handicapped Children

ADDRESS: Experimental Education Unit
University of Washington WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

YEAR OF FUNDING: 2

FISCAL AGENCY: University of Washington

PROJECT DIRECTOR: Carol Lamb-Egelston
PRINCIPAL INVESTIGATOR: Eugene Edgar
PROJECT ASSOCIATE: Pam Tazioli
OTHER STAFF TITLES: secretary

CHARACTERISTICS OF TARGET POPULATION:

The procedures developed by the project can be used by agencies serving children of all ages and types of handicap and their families. Children eligible to participate in the demonstration phase of the project are those who are enrolled in the participating agencies and are scheduled for transition or are receiving concurrent services.

PROGRAM:

The goal of the project is the development and statewide implementation of model procedures that will promote coordinated service delivery to preschool handicapped children by child service agencies and school districts. The project is developing, field testing, and evaluating step-by-step, low-cost procedures and training materials that will help coordinate education, health, and social services. All materials will be field tested in several sites.

FEATURES AND PRODUCTS:

The project will measure and document a) the impact of each objective in terms of quality, time, and cost; b) the satisfaction of those using project materials or products; c) implementation of specific activities; and d) the cost of implementing model procedures. Project staff members will develop an early childhood interagency transition model, a concurrent services model, and training materials to accompany both models.

PEPSI

Providing Educational Programs to Special Infants

ADDRESS: Summit Center for Human Development
6 Hospital Plaza
Clarksburg, West Virginia 26301

PHONE: (304) 623-5661

YEAR OF FUNDING: 3

FISCAL AGENCY: Summit Center for Human Development

DIRECTOR: Chris Hanson
OTHER STAFF TITLES: developmental specialist, screener, infant teachers, speech therapist, preschool teacher, consultants, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years who are at-risk or have developmental disabilities because of developmental, socioeconomic, environmental, and psychological factors.

PROGRAM FOR CHILDREN:

The project screens for handicapping and high-risk conditions during prenatal, neonatal, and postnatal visits with the family doctor. Children at risk for developmental or psychological problems, or parents with psychological problems, may enter the project's direct-service component. Individual education plans are written for each child and parent. Parents bring their children to the center for one-hour sessions one to four times monthly where staff members show parents tasks to carry out at home. Parents work with their children for five to ten minutes daily on each task. The Early Learning Accomplishment Profile is used as a guide for the curriculum the project is developing. The project also provides follow-up services for children who complete the direct service component of the program.

MEASURES OF CHILD PROGRESS:

The project assesses child development, interaction between parent and child, and parent effectiveness. The Learning Accomplishment Profile (LAP) and the Early LAP are used quarterly to measure child progress on developmental skills. Interaction between parent and child is measured quarterly using the Nursing Child Assessment Teaching Scale. Staff members observe the parents and use a project-developed rating scale to assess the parent as teacher. Data is analyzed to detect training trends.

PROGRAM FOR PARENTS:

The curriculum for correcting aberrant socioemotional patterns and facilitating bonding and appropriate parenting uses much the same approach as does the program for children. Parents are given method cards and instructions on discriminating infant interaction cues in the areas of attentiveness, emotion, responsiveness, and task engagement.

FEATURES AND PRODUCTS:

The project attempts to link the family physician and infant stimulation services by offering screening services and training physicians to incorporate risk screening into standard operating procedures. The project has developed at-risk screening instruments to be used in prenatal and at-birth hospital settings, and a computer-based curriculum for parents and infants.

Intensive Team Training

ADDRESS: Autism Training Center
Marshall University
Huntington, West Virginia 25701

PHONE: (304) 696-2332

YEAR OF FUNDING: 1

FISCAL AGENCY: Marshall University
DIRECTOR: Glen Dunlap
COORDINATOR: Frank Robbins
OTHER STAFF TITLES: preschool training specialist, evaluation specialist, training assistant, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves autistic or autistic-like children age two to six years and their families who reside in rural communities in West Virginia.

PROGRAM FOR CHILDREN:

The project trains teams of people who are responsible for carrying out educational interventions. The teams consist of the child, the parents/guardians, and relevant others such as preschool teachers, daycare providers, relatives, and LEA personnel. Intervention programs are carried out under the guidance of project staff.

After assessment, the project trainer and team develop an individualized training plan (ITP) designed to meet the idiosyncratic needs of the child and family. Following the initial training period, intervention programs are conducted in the home or school as appropriate. The project maintains involvement with the team throughout the preschool years until a smooth and complete transition to the LEA has been achieved. During this period, project staff maintain regular contact including a minimum of monthly telephone contacts, quarterly home visits, and bi-annual reevaluations of progress.

MEASURES OF CHILD PROGRESS:

The child's level of functioning is assessed at intake and every six months thereafter using standardized instruments, criterion-referenced scales, and video-recorded direct observation measures. Behavioral data is recorded and analyzed throughout the training process and follow-up. Single-case research designs are employed to test the efficacy of a particular technique on a specific behavior.

PROGRAM FOR PARENTS:

Adults on the team receive training in generalized behavior management and instructional techniques. Through discussion, modeling, in vivo practice with feedback, videotaped feedback, and print materials, trainees acquire skills in using instructional delivery, question asking, prompts, shaping and chaining, reinforcement and other consequences, and discrete trials. The project also provides advanced individualized training for specific needs identified on the ITP. The progress of adult participants is evaluated directly through video-recordings of adult-child interactions. Parents and participating professionals also complete satisfaction questionnaires.

FEATURES AND PRODUCTS:

During the third year of funding, the project will publish a manual and videocassette to illustrate the training process and techniques.

SPICE

Special Program of Infant and Child Education

ADDRESS: SPICE
Department of Exceptional Education
University of Wisconsin
Milwaukee, Wisconsin 53201

PHONE: (414) 963-5251
871-2979

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Wisconsin--Milwaukee

DIRECTOR: Donna Lehr
OTHER STAFF TITLES: coordinator, teacher, teaching aides, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years and their families or primary care providers. Children are severely delayed from single and multiple impairments and many have serious medical conditions.

PROGRAM FOR CHILDREN:

Services are provided in school and at home. All students attend school four days weekly, five hours daily. Program staff members meet biweekly with each child's caregiver to plan programs for home and school. The basic principles of applied behavior analysis are used to plan, implement, and evaluate educational programs in the areas of motor functioning, language and communication, social and emotional adjustment, self-help skills, and cognition. A variety of curricular guides are used. The project emphasizes the integration of therapeutic and educational goals combined with quality care-providing services.

MEASURES OF CHILD PROGRESS:

Tests such as the Early Learning Accomplishment Profile and the Infant Learning Progress Behavioral Repertoire for Handicapped Infants are used upon entrance into the program and every three months thereafter. Observation data are recorded daily for priority behaviors. Family members are instructed and encouraged to collect data as they work with their children.

PROGRAM FOR PARENTS:

Staff members make biweekly home visits. Teachers and family members jointly plan programs for school and home. Written plans for home are developed, and demonstrations of instructional procedures are provided. Parent education meetings are held as needed to provide general information. Family members are encouraged to observe and volunteer in the center-based program, and to participate in such activities as material construction, parent-to-parent interactions, and the advisory committee. Staff members also help families obtain services beyond the scope of the project.

FEATURES AND PRODUCTS:

Training and dissemination efforts are focused on persons providing educational and therapeutic programs to children with severe handicaps and on day-care workers who serve nonhandicapped children. The latter effort aims to increase the number of handicapped children in programs currently limited to nonhandicapped children through demonstration, training, and information packets.

Special Touch Preschool

ADDRESS: Special Touch Preschool
P.O. Box 1191
Powell, Wyoming 82435

PHONE: (307) 754-2864

YEAR OF FUNDING: 3

FISCAL AGENCY: Special Touch Preschool

DIRECTOR: Virginia Fish
COORDINATOR: Sally Maca
OTHER STAFF TITLES: teachers, teacher aide, speech therapist, home coordinator, home trainer, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 25 children birth to age 3 years and 20 children age 3 to 5 years. The project focuses on severely handicapped and emotionally disturbed children, although moderately handicapped children also are served. Children with almost any handicapping condition are eligible for program services.

PROGRAM FOR CHILDREN:

Children birth to age 3 years are served in a home-based program, while children age 3 to 5 years are served in either a self-contained classroom or a mainstream classroom. Children enrolled in the home-based program are visited weekly for 90 minutes. During this time, the home trainer develops and implements programs for the child and trains the parent to carry out the program. Curriculum packages include the Curriculum and Monitoring System, the Teaching Research Curriculum for Moderately and Severely Handicapped, the Portage Guide to Early Education, and the Guide to Early Developmental Training. Instructional techniques used in all settings draw heavily upon cognitive and developmental theories, using behavioral principles to organize and evaluate the environment.

MEASURES OF CHILD PROGRESS:

Progress data are obtained on each child by recording responses to tasks stated in objective terms and by determining mastery of objectives. Pre- and posttests used to measure progress include the Bayley Scales of Infant Development, the McCarthy Scales of Children's Abilities, the Learning Accomplishment Profile, the Brigance Inventory of Early Development, Sequenced Inventory of Communication Development, Weiss Articulation Test, and the Peabody Vocabulary Test.

PROGRAM FOR PARENTS:

Individual education programs focus on needs of individual children and the family as a whole. Parents receive systematic instruction in early education intervention, help determine project direction, plan instructional programs for their children, and serve as primary intervention agents. Parents and siblings also may participate in support groups.

FEATURES AND PRODUCTS:

The project offers a model for demonstrating cost-effective use of ancillary personnel in rural areas, procedures for serving low-incidence handicapping conditions, and parent involvement innovations.

Focus Classroom Outreach

ADDRESS: 2917 King Street, Suite C
Jonesboro, Arkansas 72401
PHONE: (501) 935-2750

FISCAL AGENCY: Focus, Inc.

DIRECTOR: Barbara L. Semrau
CO-COORDINATORS: Jo-Ann Hinkle and Terry Lee Sharp
OTHER STAFF TITLES: teacher trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
United Way, United Cerebral Palsy, Title XIX, Governor's Developmental Disabilities Planning Council Grant, and a local education agency

DESCRIPTION OF DEMONSTRATION MODEL:
The project uses an individualized developmental approach that emphasizes functional communication. One classroom is housed in a public school building. A second classroom has been established in a rural public school in another part of the county to eliminate transportation of the children over great distances. A third site is being established in another school district.

MAJOR OUTREACH GOALS:
- To train personnel in early childhood special education programs in rural Arkansas to replicate the Focus Communication Curriculum.
- To establish links with state agencies involved in early childhood special education.
- To develop a parent participation training model.
- To assist unserved rural areas in establishing programs for young handicapped children.
- To disseminate project materials.
- To help day service center and public school personnel replicate the Assisted Transitional model for handicapped children beginning school.

MAJOR OUTREACH SERVICES:
The project has developed a curriculum emphasizing functional communication and consisting of a training manual, activity cards, unit cards, and a weekly activity log. The project conducts a regional workshop to introduce the curriculum, and project staff visit other center-based programs to provide training in its use. The model classroom serves as an observation site. The project also helps the children's transition into public schools. A course for paraprofessionals is available through a local community college.

FEATURES AND PRODUCTS:
The project trains paraprofessionals and has developed a training manual for aides working with young handicapped children. A curriculum, Creating a Reason to Communicate (CRC), was developed to emphasize functional communication at school and at home. The project also addresses the social acceptance of handicapped children by their nonhandicapped peers in public school. The project also has developed materials for working with children whose mothers have developmental disabilities.

* 12 sites are reported to be using components of the project's demonstration model.

Rutland Center Developmental Therapy Model

ADDRESS: 125 Minor Street
Athens, Georgia 30606

PHONE: (404) 542-6076

FISCAL AGENCY: University of Georgia

DIRECTOR: Karen R. Davis
OTHER STAFF TITLES: training associate, training associate/evaluator, accounting assistant, senior secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Georgia Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

Developmental Therapy is a psychoeducational curriculum for teaching young children with severe emotional and behavioral disorders. The approach is particularly pertinent for children age 2 to 8 years and is applicable to children of varying ethnic and socioeconomic groups. The basic curriculum areas are behavior, communication, socialization, and preacademics. Within each of these areas, a series of developmental objectives is sequenced into stages of therapy. The project uses these objectives as a measure of child progress.

MAJOR OUTREACH GOALS:

- To stimulate growth of specialized, high-quality services to seriously emotionally disturbed and other handicapped children age 2 to 8 years and their parents and teachers.
- To offer technical assistance to target audiences to facilitate the use of the Rutland Center Developmental Therapy Model.

MAJOR OUTREACH SERVICES:

The project assists in program planning and design, staff development, identification and referral processes, intake and diagnostics, Developmental Therapy curriculum, school liaison, parent services, and staff evaluation. The project also disseminates information and helps establish effective evaluation systems. Technical assistance is provided through needs assessment planning, workshops, and on-site visits. The project conducts two- to five-day training sessions for teachers, administrators, paraprofessionals, and parents at the center or at regional locations. Two to four on-site visits are made to replication sites throughout the year. Special topic workshops, conducted upon request, provide additional training to sites or other interested persons.

FEATURES AND PRODUCTS:

Textbooks, videotapes, filmstrips, and brochures are available. Social-emotional goals are objectives for the psychoeducational curriculum.

* 112 sites are reported to be using components of the project's demonstration model.

JDRP-approved

PEECH

Precise Early Education for Children with Handicaps

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

PHONE: (217) 333-4894

FISCAL AGENCY: University of Illinois

DIRECTOR: Merle B. Karnes
COORDINATOR: Betsy Santelli
OTHER STAFF TITLES: replication specialist, evaluator, materials developer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois

DESCRIPTION OF DEMONSTRATION MODEL:
PEECH is a center-based program serving handicapped children age 3 to 5 years and their families. Though the mildly to moderately handicapped are the project's primary population, procedures have been adapted for lower-functioning, sensory-impaired children. The project obtains pre- and posttest data on children. Teachers assess each child's abilities using Coordinating Assessment and Programming for Preschoolers (CAPP), set individual goals and objectives, and evaluate child progress regularly.

MAJOR OUTREACH GOALS:
- To train personnel to develop, implement, and demonstrate a model early education program for preschool handicapped children.
- To prepare and disseminate materials to help early childhood personnel educate handicapped children.

MAJOR OUTREACH SERVICES:
PEECH provides intensive training to each year's replication sites and presents component workshops on topics relevant to early childhood special education. The project disseminates materials to interested professionals throughout the United States.

FEATURES AND PRODUCTS:
The project developed the CAPP child assessment instrument and provides the instrument to replication sites. PEECH also has developed classroom and parent activity manuals and numerous handouts on relevant topics in early childhood special education.

* 117 sites are reported to be using components of the project's demonstration model.

JDRP-approved

RAPYHT

Retrieval and Acceleration of Promising Young Handicapped and Talented

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

PHONE: (217) 333-4894

FISCAL AGENCY: University of Illinois

DIRECTOR: Merle B. Karnes
COORDINATOR: Jane Amundsen
OTHER STAFF TITLES: replication specialist, evaluator, materials developer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois.

DESCRIPTION OF DEMONSTRATION MODEL:
RAPYHT is a complete approach to screening, identifying, and programming for individual gifted/talented handicapped children and to general programming for all children age 3 to 5 years. The model is effective in a variety of preschool special education settings. Direct services are provided to teachers. The program also offers information and materials to the families of children identified as gifted and talented. Pre- and posttest data obtained on all children offer additional areas of emphasis for programming.

MAJOR OUTREACH GOALS:

- To train teachers in the RAPYHT general programming component through a competency-based skill development program.
- To support the identification of potential and functional gifted/talented handicapped preschool children.
- To provide preservice training to 100 college students.
- To support the provision of training to parents of gifted/talented preschool children, including general programming, talent identification (where appropriate), and specific talent assessment.
- To refine the evaluation and training components of RAPYHT.
- To promote awareness of the RAPYHT model among early childhood special education professionals.

MAJOR OUTREACH SERVICES:
Project staff members regularly contact replication sites and provide in-service training workshops and printed materials to implement the model.

FEATURES AND PRODUCTS:
Results from previous research support the contention that RAPYHT programming promotes growth in creative thinking, social functioning, motivation to achieve, and other more specific talent areas (leadership, performing arts, fine arts, academics, psycho-motor skills). General Programming, Talent Programming, and Talent Activities manuals for the home and school have been developed and are available to replication sites.

* 73 sites are reported to be using components of the project's demonstration model.

RHISE/Outreach

ADDRESS: Children's Development Center
650 North Main Street
Rockford, Illinois 61103

PHONE: (815) 965-6745

FISCAL AGENCY: Children's Development Center

DIRECTOR: Janell Bergholz
COORDINATOR: Elizabeth Landerholm
OTHER STAFF TITLES: training consultants, parent-infant educators, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Illinois Department of Mental Health/Developmental Disabilities, United Way, County 708 Board, fees, gifts, and contributions

DESCRIPTION OF DEMONSTRATION MODEL:
The demonstration program serves handicapped infants birth to age 3 years and their families in a range of settings including the home, satellite sites, and the center. The project's Consultancy Model is a transdisciplinary approach providing ongoing in-service training and consultation for the child and family. Community awareness and a strong organizational framework round out the comprehensive program. Clinical consultants measure child progress through standardized assessments, and the parent-infant educators use the Rockford Infant Development Evaluation Scales (RIDES) to document child progress.

MAJOR OUTREACH GOALS:
- To develop comprehensive, high-quality programs for handicapped infants and their families.
- To improve the quality of early intervention services through long-term training and topical workshops.
- To develop and disseminate materials that will increase public awareness of early intervention and help improve the quality of services.

MAJOR OUTREACH SERVICES:
Technical assistance includes program needs assessments, long-term training for model replication, short-term training and workshops on specific topics, on-site consultation, observation and training at the demonstration site, product dissemination, and information services.

FEATURES AND PRODUCTS:
The Consultancy Model and the project's parent program are being replicated in both rural and urban settings. Available materials include a revised curriculum syllabus; RIDES; a child development chart; a handbook on parent readiness levels; parent needs assessment packages; parent learning packages; "Discovery" and "Parent to Parent" (filmstrips developed by parents); "Hello Somebody . . ." (a film about early intervention); Child Find Workshop Proceedings; mass screening handbook; a manual on working with difficult parents; and a RIDES/TAP Index.

*65 sites are reported to be using components of the project's demonstration model.

OPTIMUS/Outreach

ADDRESS: 77B Warren Street
Brighton, Massachusetts 02135
PHONE: (617) 783-7300

FISCAL AGENCY: South Shore Mental Health Center, Inc.

DIRECTOR: Geneva Woodruff
COORDINATOR: Margaret O'Hare
OTHER STAFF TITLES: developmental specialist, physical therapist, clinical psychologist, media consultants, training consultants, administrative assistant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Third-party payments, Title XX funds, 89-313 contract, and state mental health contract

DESCRIPTION OF DEMONSTRATION MODEL:
The demonstration component is a center- and home-based program for handicapped children birth to age 3 years and their families. The project uses a modified transdisciplinary approach with a primary provider for direct services and a team to assess, plan, and evaluate. It operates under the philosophy that children must be viewed holistically; that families must be considered equal partners in their child's program; and that decision-making, planning, and implementation efforts are part of a transdisciplinary team. Staff members measure child progress every three months using developmental assessment and observation.

MAJOR OUTREACH GOALS:
- To provide quality services to handicapped children birth to age 5 years and their families.
- To train administrators and direct service personnel in the transdisciplinary model.
- To provide training and technical assistance in the transagency approach to coordination of services from multiple community agencies.
- To disseminate information about the transdisciplinary delivery model and transagency approach to service coordination.

MAJOR OUTREACH SERVICES:
Workshops, replication services, technical assistance, on-going panel presentations, and materials development constitute the major portion of the project's training efforts.

FEATURES AND PRODUCTS:
Materials developed by the project include: The Family Involvement Manual; The Family Involvement Handbook; The Policies and Procedures Manual; Transdisciplinary Workbook; and slidetapes on the transdisciplinary service delivery model, parental involvement, the ARENA assessment, and preschool programming using a transdisciplinary model (videotapes on the components of the transdisciplinary service model).

* 90 sites are reported to be using components of the project's demonstration model.

BEACON Outreach Program

ADDRESS: 376 Bridge Street
Dedham, Massachusetts 02026
PHONE: (617) 329-5529

FISCAL AGENCY: Early Recognition Intervention Network, Inc.

DIRECTOR: Peter K. Hainsworth
COORDINATOR: Marian Hainsworth and Laurie Van Loon
OTHER STAFF TITLES: language development specialist, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
The Early Recognition Intervention Network in conjunction with a local education agency and preschool center

DESCRIPTION OF DEMONSTRATION MODEL:
The project serves bilingual children, age 2 to 7 years, using the ERIN Information Processing Model of screening/evaluation and curriculum adapted into several languages. Two groups of children are served: mildly handicapped children are served in bilingual and monolingual mainstream P-K-1 classrooms; and moderately and severely handicapped children are enrolled in special preschool classes, usually for one large language group, such as Spanish.

MAJOR OUTREACH GOALS:
- To promote bilingual services for young handicapped children.
- To train teachers/specialists to use bilingual Preschool Screening System adaptations.
- To train teachers to stimulate skills and concepts using a combination of English and native language materials.
- To involve bilingual parents in understanding and supporting their child's education, through home teaching and generalized awareness.
- To assist the local coordinator in carrying out and extending training.
- To develop and disseminate screening and curriculum materials.

MAJOR OUTREACH SERVICES:
BEACON staff provides two to five days of training for replication sites, including workshops, in-class visits, and meetings with administrators. Model classrooms and specialists in the Boston area demonstrate the model. Bilingual screening and curriculum materials are disseminated through contact with bilingual, special education, early childhood and National Diffusion Network personnel in state governments, LEA's, and other interested agencies.

FEATURES AND PRODUCTS:
The project provides materials to help a city or region screen its bilingual populations and structure a curriculum that is culturally sensitive and efficient. New languages are adapted as requested. The screening tool, the Preschool Screening System, is available in 18 parallel language adaptations. The process-oriented curriculum is available to all language groups and currently has special materials for Spanish and Chinese children.

* 18 sites are reported to be using components of the project's demonstration model.

AIM Outreach

Albuquerque Integration Model

ADDRESS: 3501 Campus Boulevard, NE
Albuquerque, New Mexico 87106
PHONE: (505) 266-8811

FISCAL AGENCY: Albuquerque Special Preschool

DIRECTOR: Gail Chasey Beam
COORDINATOR: Deborah McCue

OTHER STAFF TITLES: integration specialists, speech pathologist, product development specialist, parent counselor, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
New Mexico Health and Environment Department, Developmental Disabilities Bureau, United Way of Greater Albuquerque, and Albuquerque Special Preschool

DESCRIPTION OF DEMONSTRATION MODEL:
The Albuquerque Integration Model (AIM) serves handicapped and nonhandicapped children age 2 to 5 years in integrated classrooms. Educators are cross-trained in the use of diagnostic and cognitive-developmental approaches. Assessments include the Learning Accomplishment Profile, the Westby Symbolic Play Scale, the Alpern-Boll, the Criteria Checklist (developed by the project), and various language and motor instruments.

MAJOR OUTREACH GOALS:
- To stimulate high-quality mainstream programs for young handicapped children and their families in rural and urban New Mexico.
- To promote state involvement in programs for handicapped preschoolers.
- To increase awareness of the advantages of mainstreaming.
- To develop and disseminate products on mainstreaming.

MAJOR OUTREACH SERVICES:
The project conducts awareness activities, develops and disseminates products, provides consultation and technical assistance, trains professionals, and promotes adaptation of the model at other sites. The project has developed mainstreaming and assessment guidelines to the early childhood state plan.

FEATURES AND PRODUCTS:
The project has developed Making Integration Work--A Teacher's Perspective, a guide for integrating handicapped and nonhandicapped preschoolers; Criteria for Integrating/Mainstreaming Handicapped Children, a checklist of behaviors used with developmental assessments; Integration: A Handbook for Parents, a question-and-answer handbook that covers common concerns about mainstreaming (a Spanish edition and an edition for Native Americans are available); Reach Out, a quarterly newsletter; Transition Package; Family Involvement and the Preschool Program; and educational videotapes on communication development, learning environments, play, and other subjects.

* 10 sites are reported to be using components of the project's demonstration model.

FEED

Facilitative Environments Encouraging Development

ADDRESS: Hunter College, Box 20
695 Park Avenue
New York, New York 10021

PHONE: (212) 772-4708

FISCAL AGENCY: Local school districts

DIRECTOR: Nicholas Anastasiow
COORDINATOR: Lisa Simon

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agencies

DESCRIPTION OF DEMONSTRATION MODEL:

Junior high students receive classroom instruction in the nature of normal and delayed development. They work with handicapped and nonhandicapped children in preschool and health-care facilities. Thirty-five objectives are aimed at improving the outcome of child rearing.

MAJOR OUTREACH GOALS:

- To establish new projects in New York City and consult with other interested communities.

MAJOR OUTREACH SERVICES:

Staff members consult with other projects, develop programs, and locate practicum sites (hospitals, preschool handicapped centers, preschools serving the nonhandicapped, day care).

FEATURES AND PRODUCTS:

The curriculum is designed by objectives, and instructional materials (books, films, etc.) are keyed to objectives. Evaluation data indicate major change in attitudes toward handicapped children and health-care facilities. Students report positive feelings about being helpful, and handicapped centers receive valuable service from students.

JDRP-approved

A Regional Program for Preschool Handicapped Children

ADDRESS: Putnam/Northern Westchester BOCES
Projects Building
Yorktown Heights, New York 10598

PHONE: (914) 962-2377

FISCAL AGENCY: Putnam/Northern Westchester Board of Cooperative Educational Services

DIRECTOR: Carol S. Eagen
COORDINATOR: Marianne Vaughan
OTHER STAFF TITLES: secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
New York State Department of Education and the county of the child's residence (under Section 236 of the Family Court Act)

DESCRIPTION OF DEMONSTRATION MODEL:
The model provides a comprehensive program of educational services designed to increase verbal, perceptual, motor, and general cognitive skills (as measured by the McCarthy Scales of Children's Abilities) of handicapped children age 2 1/2 to 5 years. The structured classroom program utilizes diagnostic/prescriptive teaching, language intervention, and positive reinforcement in an Interactive Teaching Process. A transdisciplinary team conducts assessments and provides direct services in the classroom. Parent involvement through volunteering, group meetings, and counseling is a vital component.

MAJOR OUTREACH GOALS:
- To provide training and technical assistance to programs interested in adopting the Regional Program model or components.
- To coordinate training with state planning agencies.
- To exchange information and materials with other projects and agencies.
- To prepare trainers from demonstration sites to train target staff.

MAJOR OUTREACH SERVICES:
The project offers and evaluates awareness workshops, needs assessments for individual agencies, and specific training in model components (Parent Involvement, Transdisciplinary Model, and Interactive Teaching).

FEATURES AND PRODUCTS:
The following materials are available from the project: The Curriculum Model for a Regional Demonstration Program for Preschool Handicapped Children; Preschool Project Manual; The Parent Volunteer System: A Manual and Activity Catalog for Teachers; Transdisciplinary Training, Assessment and Consultation Model, A Guide for Creating Community Awareness and Developing Interagency Cooperation; Parent Group Meetings -- Techniques and Topics; Preschool Play: Observation and Intervention; Transition Program -- Preparing for School; Long Range Effects of the Preschool Handicapped Program -- A Follow Up Study; and Summary of Program Accomplishments 1979-81.

* 128 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Teaching Research Infant and Child Center Data-Based Classroom

ADDRESS: Todd Hall
345 North Monmouth Avenue
Monmouth, Oregon 97361

PHONE: (503) 838-1220

FISCAL AGENCY: Oregon State System of Higher Education--Teaching Research

DIRECTOR: Joyce M. Peters
COORDINATOR: Torry Piazza Templeman
OTHER STAFF TITLES: trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local and state funds

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a classroom-based behavioral program serving children age 2 to 8 years with a variety of handicaps including Down's syndrome, cerebral palsy, mental retardation, speech delay, and risk conditions. The program emphasizes individual instruction, trial-by-trial data collection, and the use of trained volunteers as instructors. The Teaching Research Placement Test is the key assessment instrument used to place children into the Teaching Research Curriculum for Moderately and Severely Handicapped. The format of the curriculum is developmental and task analyzed.

MAJOR OUTREACH GOALS:

- To stimulate quality replications of the model's key components.

MAJOR OUTREACH SERVICES:

The project offers five days of training at the demonstration center at Teaching Research. Two follow-up, technical assistance visits are provided to each replication site. The project also conducts awareness workshops.

FEATURES AND PRODUCTS:

The project offers practicum-based training in a Teaching Research demonstration classroom with supervision and feedback provided by project staff. Ongoing evaluation is provided to trainees before, during, and after training, and at the time of follow-up. Project staff members have produced the following publications: Training in the Teaching Research Data Based Classroom Model (available only with training); The Data Based Classroom for Moderately and Severely Handicapped; and Teaching Research Curriculum (volumes include Language, Self-Help, Cognitive, Gross and Fine Motor). Staff members are available to provide both general awareness presentations and in-depth workshops on model components.

* 400 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Family Centered Resource Project

ADDRESS: Albright College
P.O. Box 516
Reading, Pennsylvania 19603

PHONE: (215) 921-2381
Ext. 236

FISCAL AGENCY: Pennsylvania Department of Education

DIRECTOR: Gilbert M. Foley
ASSISTANT DIRECTOR: Barbara J. Keene
TRAINING SPECIALIST: Wendy Walker Davis
OTHER STAFF TITLES: pediatric consultant, physical therapist, occupational therapist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Berks County Intermediate Unit--Preschool Special Needs Program

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides family center service to multihandicapped infants and preschoolers with mental retardation and neuromotor dysfunction. The project's theoretical orientation integrates a developmental frame of reference and object relation analysis. Service delivery consists of the following three model components: the transdisciplinary approach, family development planning, and assessment and facilitation of attachment-separation-individuation.

MAJOR OUTREACH GOALS:

- To increase and enhance services to preschool handicapped children in Pennsylvania and the nation through awareness training and replication of the model.
- To train preschool personnel in the three components of the model.
- To develop and disseminate resource materials for preschool personnel.

MAJOR OUTREACH SERVICES:

The project provides needs assessments, replication training, follow-up site visits, individualized technical assistance, one-day awareness workshops, participatory conferences, keynote addresses, and college courses.

FEATURES AND PRODUCTS:

The project uses a family-oriented transdisciplinary approach to serve handicapped infants and preschoolers. Project staff members have expertise in transdisciplinary assessment and programming, family intervention (particularly as it relates to loss-grief reactions), and facilitating the process of attachment-separation-individuation in handicapped children. Products include: Medical Perspectives on Brain Damage and Development, the Attachment-Separation-Individuation Scale, Family Development Planning: A Process Manual, and the Cognitive Observation Guide. The project also disseminates awareness materials describing the three components of the model.

* 55 sites are reported to be using components of the project's demonstration model.

Cognitive Early Education Project

ADDRESS: Box 9, Peabody College
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8380

FISCAL AGENCY: Vanderbilt University

DIRECTOR: H. Carl Haywood
COORDINATOR: David L. Weatherford
OTHER STAFF TITLES: teaching training specialist, early education specialist, curriculum specialist, classroom evaluation specialist, project assistant, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Tennessee Department of Human Services (Title XX), Tennessee Department of Mental Health/Mental Retardation, Tennessee Conference of United Methodist Churches, and private donations

DESCRIPTION OF DEMONSTRATION MODEL:
The model is designed to serve children between the ages of 3 and 6 years developmentally. Cognitive Curriculum for Young Children, developed for this model, is a process-oriented curriculum to teach children how to think and learn. Precognitive and cognitive functions are taught in a preschool classroom setting. In-classroom and at-home activities teach parents to mediate learning experiences for their children. The McCarthy Scales of Children's Abilities, tests of motivation, criterion-referenced measures of curricular progress, and observations of classroom behavior are used to assess child progress.

MAJOR OUTREACH GOALS:
- To provide training, consultation, technical assistance, and materials to preschool programs that implement the Cognitive Education model.
- To develop and implement an effective outreach model.
- To evaluate the effectiveness of the Cognitive Education approach in terms of influence on children's general development and educability.
- To improve parents' role in their children's development.

MAJOR OUTREACH SERVICES:
The project disseminates information and provides awareness workshops. For programs selected as replication sites, the project provides consultation, technical assistance, training, and curriculum and didactic materials.

FEATURES AND PRODUCTS:
The Cognitive Curriculum for Young Children has eight units that focus on acquisition of specific cognitive functions. Each unit also enhances children's development of communication processes, task-intrinsic motivation, generalized representational thought, and knowledge accumulation. The units are arranged sequentially so that principles and cognitive functions learned in each unit are integrated into the next unit. A parent educational manual also is available.

* 24 sites are reported to be using components of the project's demonstration model.

DEBT

Developmental Education Birth through Two

ADDRESS: 1628 19th Street
Lubbock, Texas 79401

PHONE: (806) 747-2641
Ext. 455

FISCAL AGENCY: Lubbock Independent School District

COORDINATOR: Gloria Galey
OTHER STAFF TITLES: teacher trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agency

DESCRIPTION OF DEMONSTRATION MODEL:

The model serves children birth to age 2 years who have a variety of handicaps. The project provides medical evaluations, a weekly home instructional program, and related services, and assists families in securing state and community services. The project offers a weekly water play program, parent study groups, child play groups, parent library, parent-to-parent program, transition assistance, follow-up services, and training. The project maintains records of informal observation in the home; case history data; assessments, including Vineland Scale of Social Maturity, Denver Developmental Screening Test, the Koontz, and the Bzoch-League Receptive-Expressive Emergent Language Scale (REEL); and medical and related services evaluation.

MAJOR OUTREACH GOALS:

- To train volunteers, paraprofessionals, and professionals to implement home-based programs for parents of very young handicapped children.
- To disseminate DEBT Project model information, service delivery system, and training materials.
- To provide research data to state decision makers.
- To promote development of services for unserved handicapped children.

MAJOR OUTREACH SERVICES:

The project provides pre-service and in-service training in health, education, and social service professionals and provides ongoing consultation to urban and rural replication sites. Staff members provide on-site training to pediatric residents at Texas Tech Health Science Center Medical School. The project provides comprehensive assistance to communities interested in implementing services for young handicapped children.

FEATURES AND PRODUCTS:

The project operates in a multicultural urban and rural community. Products include: DEBT Developmental Scale from Birth to Six Years, DEBT Teacher Activities Packet Birth to 36 Months, Comprehensive Training Notebook, DEBT GOSPEL (guidebook for program design), DEBT Model Project (brochure), Love Your Baby, and a bibliography of literature on child development and intervention. A variety of research documents also are available.

* 58 sites are reported to be using components of the project's demonstration model.

INSITE Outreach

ADDRESS: Department of Communicative Disorders
Utah State University
Logan, Utah 84322-1005

PHONE: (801) 752-4601

FISCAL AGENCY: Utah State University

DIRECTOR: Thomas C. Clark
COORDINATOR: Dorothy Jensen
OTHER STAFF TITLES: evaluator, product development specialist, trainers, deaf-blind specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State legislature through Utah Schools for the Deaf and Blind

DESCRIPTION OF DEMONSTRATION MODEL:

The project identifies and serves multihandicapped sensory-impaired, deaf multihandicapped, blind multihandicapped, deaf/blind multihandicapped, and severely multihandicapped children birth to age 6 years. The project uses a Home Intervention model for infants and young children and their families. The project has the following components: 1) a communication program; 2) a parent discussion program; 3) a developmental program; and 4) program management.

MAJOR OUTREACH GOAL:

- To help agencies provide high-quality home intervention services for underserved and unserved multihandicapped sensory-impaired preschoolers.

MAJOR OUTREACH SERVICES:

Project staff offer awareness activities, conduct conferences, develop curricular materials, train, disseminate information, offer on-site technical assistance, and evaluate programs through a nationwide data bank.

FEATURES AND PRODUCTS:

Project INSITE conducts two on-site workshops for each adoption site and trains parent advisors, administrators, and support personnel in the curriculum and service delivery. A pre-training planning and assistance conference with local site staff takes place the day before the first training workshop. A post-training consultation, review, and next-steps planning conference is conducted onsite at the second workshop. The project has four curriculum manuals, one for each program component. A fifth manual covers the Intervention Program of direct daily service to the multihandicapped child and respite for the parents, which can be initiated as part of INSITE services. In addition, the project has a handbook on developing sign communication with the multihandicapped sensory-impaired child. The project has eight statewide and nine regional adoptions.

- 17 sites are reported to be using components of the project's demonstration model.

MAPPS

Multi-Agency Project for Preschoolers

ADDRESS: Developmental Center for Handicapped Persons
Utah State University
Logan, Utah 84322-6850

PHONE: (801) 750-2019

FISCAL AGENCY: Developmental Center for Handicapped Persons, Utah State University

DIRECTOR: Glendon Casto
COORDINATOR: Adrienne Peterson
OTHER STAFF TITLES: physical therapist, speech pathologist, child development specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a home-and community-based intervention program serving delayed children birth to age 5 years in rural and remote areas where there are few professionals trained to work with delayed children. The program teaches parents of delayed children birth to age 3 years to act as intervention agents for their children. For delayed children age 3 to 5 years, the program provides curriculum materials and training to parents and teachers in existing preschools and community day-care programs.

MAJOR OUTREACH GOALS:

- To promote coordination of state services to preschool children.
- To develop and disseminate products.
- To train service providers to improve the quality of services.
- To stimulate establishment of services in underserved areas.

MAJOR OUTREACH SERVICES:

The project provides training in the use of the Curriculum and Modeling System (CAMS) program, and in the areas of cognitive skills, receptive and expressive language, motor skills, self-help skills, and social-emotional development. The project also provides technical assistance in program evaluation.

FEATURES AND PRODUCTS:

Project staff administer standardized and criterion-referenced pre- and post-tests, including the Battelle Developmental Inventory, Bayley Scales of Infant Development, Peabody Picture Vocabularly Test, and the Visual Motor Integration Test. The CAMS curriculum materials and criterion-referenced tests are available for purchase. Project-developed materials have been used extensively with Native American populations.

* 60 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Social Integration Outreach Project

ADDRESS: Developmental Center for Handicapped Persons
Utah State University
Logan, Utah 84322-6805

PHONE: (801) 750-1991

FISCAL AGENCY: Utah State University

CO-DIRECTORS: Joseph J. Stowitschek and Sarah Rule
COORDINATOR: Jill Trice Morgan
OTHER STAFF TITLES: project trainer, special education teachers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State education agency

DESCRIPTION OF DEMONSTRATION MODEL:

The project promotes the integration of handicapped children age 2 to 5 years into early education sites. The model is designed so that services can be delivered primarily by regular classroom teachers with support by special educators and specialists (e.g., speech, occupational therapy). The components of the model are service delivery, basic developmental skill building, social skills instruction, home support, and microsessions.

MAJOR OUTREACH GOALS:

- To provide training and technical assistance to preschools and day-care programs that integrate handicapped children using the project's model or its components.
- To develop and evaluate outreach procedures for training and technical services.
- To increase availability of services to handicapped children in rural and urban settings.
- To expand outreach capabilities by developing telecommunications systems for delivery, monitoring, and follow-up.

MAJOR OUTREACH SERVICES:

The project offers on-site staff training in model components. Children are integrated into regular classroom activities, supplemented when necessary by incidental teaching and microsessions (individual or small-group lessons). Workshop training and follow-up are provided in the use of microsession training and transfer, the Let's Be Social Curriculum, and integration of preschool children.

FEATURES AND PRODUCTS:

The project has developed Let's Be Social, a social skills curriculum, for use in classrooms and at home. Training and follow-up in the use of the curriculum are available. A microsession training and transfer workshop to teach aides and parents to teach young handicapped children is also disseminated by project staff.

* 29 sites are reported to be using components of the project's demonstration model.

Hampton University Mainstreaming Outreach Services

ADDRESS: Hampton University
Hampton, Virginia 23668
PHONE: (804) 727-5751

FISCAL AGENCY: Hampton University

CO-DIRECTORS: James B. Victor and Evelyn Reed
OTHER STAFF TITLES: outreach training specialists, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Hampton University

DESCRIPTION OF DEMONSTRATION MODEL:

The project integrates mildly to moderately handicapped children age 18 months to 6 years with their nonhandicapped peers. Individualized and culturally appropriate educational objectives are incorporated into the daily classroom routine. The mainstreaming resource teacher serves as a model within the classroom, a consultant in team planning sessions, and a facilitator for transition. Parents participate according to individual needs and interests.

MAJOR OUTREACH GOALS:

- To assist target agencies in replicating the model.
- To prepare and disseminate awareness, instructional, and training products.
- To maximize use of existing services by coordinating with local, regional, and national groups.
- To increase awareness of model components and outreach services.

MAJOR OUTREACH SERVICES:

The project serves local school divisions, Head Start programs, social service and community agencies, pediatricians, and day-care centers. Training specialists help sites assess needs and provide appropriate training programs (workshops, classroom demonstrations, on-site consultations, summer institutes, courses for college or continuing education credit, and practicum experiences). Classes on mainstreaming young handicapped children are taught throughout the state. Project staff are involved in the Virginia Early Intervention Network, Virginia Association for First Chance Projects, Virginia Division for Early Childhood, and Virginia Action for Prevention, and local, regional, and state agencies. Recent collaborative efforts include development of Virginia SEA/Head Start Collaborative Agreement and Hampton Foster Parent Training.

FEATURES AND PRODUCTS:

Products include awareness materials and such training materials as Beyond Yes or No: Vulpe Performance Analysis Scale, Resources . . . in the Classroom, Very Important Preliminary Steps for Mainstreaming, Cultural Diversity Awareness Inventory, Social Interaction Assessment, Observation of Mainstreaming Readiness, Side by Side: Resource and Classroom Teachers. Products in development are Planning for Transition, Child Find Strategies for the Culturally Diverse Child, and Collaborative Steps: Head Start and the Public Schools Working Together.

* 13 sites are reported to be using components of the project's demonstration model.

CDR Outreach

Child Development Resources

ADDRESS: P.O. Box 299
Lightfoot, Virginia 23090

PHONE: (804) 565-0303

FISCAL AGENCY: Williamsburg Area Child Development Resources, Inc.

EXECUTIVE DIRECTOR: Corinne W. Garland
PROJECT DIRECTOR: Sharon E. Kiefer
OTHER STAFF TITLES: training consultants, secretary/bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Mental Health and Mental Retardation Community Services Board, United Way, private contributions, and fees

DESCRIPTION OF DEMONSTRATION MODEL:

The CDR Parent-Infant Program serves handicapped and developmentally delayed children birth to age 2 years and their families in a two-city, two-county rural area of Virginia. The goal is to assist families in enhancing the development of their children and in preventing or ameliorating the effects of handicapping conditions. CDR uses a transdisciplinary approach, with parents serving as team members, and offers a combination of home- and center-based activities for children and families. Components of the model include child find; transdisciplinary service model of assessment, staffing, and program planning; developmental day care; and clinical consultations.

MAJOR OUTREACH GOALS:

- To assist state agencies developing and/or refining early childhood plans, using an interagency/interdisciplinary, collaborative process.
- To assist agencies beginning early intervention programs in the adaptation/replication of the CDR Parent-Infant Program or its components.
- To assist established early intervention programs interested in program/staff development through competency-based training.

MAJOR OUTREACH SERVICES:

The project provides technical assistance to state agencies based on individual needs assessment. A week-long core training program is offered to adaptation/replication sites with continued technical assistance based on assessed needs. Competency-based training is available to establish programs.

FEATURES AND PRODUCTS:

CDR plays a leadership role in the Virginia Association of First Chance Projects, the Association of Virginia Infant Programs, statewide committees involved in interagency program planning for young children, the Rural Network, and INTERACT. Materials available include Skills Inventory for Parents, a system of measuring change in parental skills; Skills Inventory for Teachers, a system of evaluating skills of home-based early intervention personnel; Teaching Activities for Parents, 450 activities for infants birth to age 2 years (commercially available from Kaplan Press as Early Learning Activities); and Virginia: Early Intervention Program Guide.

* 42 sites are reported to be using components of the project's demonstration model.

ECHI Outreach Project

ADDRESS: Experimental Education Unit
University of Washington, WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

FISCAL AGENCY: University of Washington

DIRECTOR: Marie Thompson
COORDINATOR: Laurene Burton
OTHER STAFF TITLES: information specialist, secretary, consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Office of the Washington State Superintendent of Public Instruction, Department of Social and Health Services (DSHS), and private funding sources

DESCRIPTION OF DEMONSTRATION MODEL:
The Early Childhood Home Instruction Program for Young Hearing Impaired Children and Their Families (ECHI) provides home-based instruction for hearing-impaired children birth to age 3 years and their families who are referred by audiologists, physicians, and community agencies. The model provides weekly home visits from trained personnel using an established curriculum; coordination with the child's receiving educational agency to ensure smooth transition to an appropriate program at age 3 years; evaluation of child and parent gains, as well as parent satisfaction with the program; and a weekly classroom/parent group experience (optional for outreach replication sites). Families enrolled in the program reside in western Washington, many in rural areas having no other appropriate services for hearing-impaired children.

MAJOR OUTREACH GOALS:
- To provide and/or improve educational services to young hearing-impaired children in underserved areas of Washington.
- To help at least two sites adopt the model program through replication of its major components.

MAJOR OUTREACH SERVICES:
The project provides the curriculum for participants, hand-outs for parents, and instructional and play materials not available at the outreach sites. Project staff disseminate information, conduct training workshops, and provide individual on-site follow-up visits throughout the year.

FEATURES AND PRODUCTS:
The project provides a counselor specially trained to work with hearing-impaired children and their families; a sign language instruction program on videocassette, with VCR available on loan; and a lending library of resource materials for parents. Regular inservice training is required of ECHI Parent Trainers to upgrade skills in early childhood development, informal counseling techniques, and family dynamics. Sign language instruction for parents and parent trainers is provided by a graduate of Gallaudet College who is hearing-impaired.

Fathers Program Outreach

ADDRESS: Experimental Education Unit
Child Development and Mental
Retardation Center
University of Washington, WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Donald J. Meyer
OTHER STAFF TITLES: information specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Private donations, United Way, and reimbursement from state developmental disabilities bureau

DESCRIPTION OF DEMONSTRATION MODEL:

The Fathers Program focuses on the interests and concerns of fathers of children with special needs. Fathers and children attend Saturday morning programs that provide peer support for fathers; information reflective of fathers' interests; and opportunities for fathers to interact with their child. Features include a Fathers Forum; play-group activities; and guest speakers who discuss topics chosen by participants. The program is co-facilitated by two men: the father of a child with special needs and a special education teacher.

MAJOR OUTREACH GOALS:

- To increase awareness of the needs of fathers and their handicapped children.
- To develop and disseminate a national newsletter on father involvement.
- To provide demonstration, training, and technical assistance to programs and agencies wishing to add a program for fathers to their existing matrix of services.
- To evaluate program effectiveness in outreach sites.

MAJOR OUTREACH SERVICES:

Project staff provide training in how to plan, organize, and produce programs for fathers of children with special needs. Demonstration and training are available to help staff stimulate and guide group discussions with fathers. Staff also conduct "Fathers Only" workshops at major regional and national parent conferences. Technical assistance is provided to programs beginning or expanding a Fathers Program.

FEATURES AND PRODUCTS:

The University of Washington Press has published A Handbook for the Fathers Program: How to Organize a Program for Fathers and Their Handicapped Children. Focus on Fathers is a quarterly newsletter prepared and disseminated by the project outlining programs and services for fathers of children with special needs. Project staff also provide programs and develop materials for siblings and grandparents of children with special needs.

Model Preschool Outreach Project

ADDRESS: Experimental Education Unit
University of Washington, WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Patricia Oelwein
OTHER STAFF TITLES: field trainer (communication model), field trainer (Down's Syndrome model), dissemination specialist, research coordinator/programmer, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
The state of Washington, local education agencies, and public agencies

DESCRIPTION OF DEMONSTRATION MODEL:
The project conducts two programs for children. a) The Program for Children with Down's Syndrome and Other Developmental Delays is designed to accelerate and maintain children's gains in fine- and gross-motor, self-help, social, communication, and cognitive areas. b) The Communication Program uses systematic instructional programming in communication and language to modify the deficiencies identified by assessment and by observation in the classroom. Children in the Down's Syndrome program are assessed twice yearly with the Developmental Sequence Performance Inventory. The Communication Program uses the Sequenced Inventory of Communication Development, the Peabody Picture Vocabularly Test (revised), pre/post language samples, and (when appropriate) the Preschool Profile.

MAJOR OUTREACH GOALS:
- To provide training and other assistance to programs.
- To prepare and disseminate materials to programs and individuals.
- To promote awareness and stimulate improved services.

MAJOR OUTREACH SERVICES:
The project offers field-based and center-based training, technical assistance, instructional and informational materials, and follow-up assistance as requested.

FEATURES AND PRODUCTS:
The program has demonstrated that it can work effectively with communication-delayed children and those with Down's Syndrome and other developmental delays. Parent involvement techniques maximize child gains as parents and other members of the interdisciplinary team coordinate efforts at home and at school.

* Over 100 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Northwest Center Child Development Program

ADDRESS: 2919 1st Avenue West
Seattle, Washington 98119

PHONE: (206) 281-9222

FISCAL AGENCY: Northwest Center

DIRECTOR: James McClurg
COORDINATOR: Linda L. Gil
OTHER STAFF TITLES: occupational therapist, communications disorder specialist, registered nurse, special education teacher, family specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Developmental Disabilities; Title I; tuition from parents of nonhandicapped children; state, county, and local public revenues; private funding sources; and donations.

DESCRIPTION OF DEMONSTRATION MODEL:

The center- and home-based programs serve children birth to age 5 years and their families. Children may be multihandicapped or mildly delayed in one skill area. The center-based program is completely integrated (65 nonhandicapped children and 40 handicapped children). Educational programming, therapies, family involvement, health services, and a nutrition component are provided. Child progress is measured by standardized and criteria-referenced developmental checklists. Family involvement is systematically tracked and evaluated, based on the individual plans designed by families.

MAJOR OUTREACH GOALS:

- To disseminate information about the model to other programs.
- To replicate components of the model.
- To help program staff of replication sites coordinate services to children jointly served by two or more agencies.
- To train program staff of early childhood programs to provide services to children in mainstream and integrated environments.
- To train child care providers in home- and center-based programs.

MAJOR OUTREACH SERVICES:

The project conducts presentations to organizations, public schools, and agencies. Project staff provide direct training and evaluation assistance to programs replicating components of the model. Staff also consult with community college programs where early childhood personnel are being trained. Dissemination of project-developed materials is a major service.

FEATURES AND PRODUCTS:

The project has developed The Integration of Handicapped and Nonhandicapped Infants and Toddlers: A Guide to Program Development; a series of ten tapes from the "Young and Special" series (to enhance the use of specific training components at replication sites); and a curriculum guide for use with disabled parents of at-risk and handicapped children.

* 62 sites are reported to be using components of the project's demonstration model.

The Portage Project

ADDRESS: 626 East Slifer Street
P.O. Box 564
Portage, Wisconsin 53901

PHONE: (608) 742-8811

FISCAL AGENCY: Cooperative Educational Service Agency #5

DIRECTOR: George Jesien
OTHER STAFF TITLES: training specialists, curriculum development specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Twenty-three local school districts in south-central Wisconsin in cooperation with the Wisconsin Department of Public Instruction

DESCRIPTION OF DEMONSTRATION MODEL:

The Portage Project is a structured, data-based, individualized home teaching program serving multicategorical handicapped children birth to age 6 years. A home teacher helps parents assess their child's skills in five developmental areas, target emerging skills, define appropriate teaching techniques, and evaluate the child's performance. One-to-one interaction promotes full family participation and individualization of instructional goals. A combination classroom/home-based option is offered for children preparing to enter kindergarten.

MAJOR OUTREACH GOALS:

- To provide training and technical assistance to agencies interested in implementing home-based or classroom services for preschool children with special needs.
- To advocate for and help support effective and satisfying direct involvement of parents in the education of their children.
- To develop and disseminate materials.
- To support the HCEEP goal of comprehensive services for all handicapped children birth to age 6 years.

MAJOR OUTREACH SERVICES:

Project staff provide training and technical assistance to replication and demonstration sites, conduct awareness workshops and conference presentations, and develop and disseminate materials to help replicate the model.

FEATURES AND PRODUCTS:

The project has developed the Portage Guide to Early Education (English and Spanish), a curriculum assessment for handicapped children birth to age 6 years; the Portage Parent (training) Program; Get A Jump On Kindergarten; The Portage Home Teaching Handbook; and training modules on topics such as "Transitioning the Special Needs Child," "Positive Discipline," "Individualizing in the Classroom," and "Gaining Parent Involvement." The new Portage Classroom Curriculum is designed for a classroom setting with typical and mildly/moderately handicapped children age 2 to 6 years, with focus on the teaching of functional skills. The curriculum is presently undergoing field testing with 175 teachers and will be available in fall 1986.

JDRP-approved

Alabama

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Freda Judge	PHONE: (205) 261-5099
COORDINATOR:	Sherri Litchfield	PHONE: (205) 261-5099
STATE PLAN GRANTEE ADDRESS:	Alabama Department of Education Program for Exceptional Children and Youth 1020 Monticello Court Montgomery, Alabama 36117	
SPECIALNET USER NAME:	ALSE	
FISCAL AGENCY:	Alabama Department of Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Anne Ramsey	PHONE: (205) 261-5099

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 6 to 21 years.
Permissive: age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To identify agencies that serve preschoolers including the handicapped.
- To identify persons to serve on a planning-phase advisory panel to help plan a statewide needs assessment.
- To investigate logistics of tracking handicapped preschoolers.
- To investigate logistics of administering Department of Education activities related to preschool handicapped children.

INTERAGENCY COMPONENT:

The Alabama Department of Education has working relationships with the Departments of Public Health, Mental Health, and Pensions and Security, the state agencies responsible for the major programs currently available to handicapped preschoolers. Alabama will investigate the logistics of more formal interagency commitments during the project year. An HCEEP planning-phase advisory panel representing professional, support, and lay persons will review initial data summaries and make recommendations regarding a formal statewide needs assessment.

FEATURES AND PRODUCTS:

Alabama will focus its initial efforts on identifying existing services that integrate, or could integrate, handicapped and nonhandicapped children. First-year activities will yield a formal needs assessment design.

Alaska

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTORS:	Christine Niemi Sherman Welch	PHONE: (907) 465-2970
COORDINATOR:	Colleen Powers	PHONE: (907) 277-2451
STATE PLAN GRANTEE ADDRESS:	Alaska Easter Seal Society Preschool Resources for Alaska Special Education 620 E. 10th Avenue, Suite 203 Anchorage, Alaska 99501	
SPECIALNET USER NAME:	ALASKAOEC (Department of Education) AKEASTERSEAL (project)	
FISCAL AGENCY:	Alaska Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	Easter Seal Society of Alaska, Inc.	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	William S. Mulnix	PHONE: (907) 465-2970

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 21 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To conduct a statewide needs assessment of the components of a comprehensive service delivery system.
- To identify policies, personnel, fiscal resources, and systems of management needed to develop and implement a state plan.
- To develop an evaluation plan.
- T promote public awareness of services for handicapped children.

INTERAGENCY COMPONENT:

The following agencies, programs, and organizations are part of a group to help plan, develop, and implement a state plan for preschool handicapped children: Alaska Department of Education; Department of Health and Social Services; Department of Community and Regional Affairs; the Governor's Council for the Handicapped and Gifted; institutions of higher education; Head Start; Regional Access Program; Alaska Resources for the Moderately and Severely Impaired; Academy of Pediatrics; Council for Exceptional Children; Association for Retarded Citizens; SEPTR (a parent advocacy group); and numerous professional organizations (CASE, ASHA, NASP).

FEATURES AND PRODUCTS:

The Easter Seal Society of Alaska, Inc., is subcontracted to conduct substantive activities of the project.

American Samoa

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Jane J. French	PHONE: 011 (684) 633-4789
COORDINATOR:	Caroline Clark	PHONE: 011 (684) 633-4789
STATE PLAN GRANTEE ADDRESS:	American Samoa Department of Education Division of Special Education American Samoa Government Pago Pago, American Samoa 96799	
FISCAL AGENCY:	American Samoa Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Jane J. French	PHONE: 011 (684) 633-4789

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To complete a needs assessment necessary to design and implement a state plan for services to children birth to age 5 years.
- To collect current demographic information.
- To evaluate available services and establish interagency collaboration between special education, regular education, and medical services.
- To review current program standards and regulations.
- To develop parent and staff training opportunities.
- To identify additional funding sources.
- To plan and implement a campaign to increase public awareness.

INTERAGENCY COMPONENT:

A cooperative agreement will be developed between the Early Childhood Division and the Special Education Division within the American Samoa Department of Education and the Department of Medical Services to clarify the roles and responsibilities of each in regard to child-find efforts, evaluation of current services, and public awareness. A task force of parents, professionals, and community leaders will be formed to begin planning activities.

FEATURES AND PRODUCTS:

American Samoa's Special Education Division with the Department of Medical Services and the Division of Early Childhood Education will develop a cooperative agreement and conduct a comprehensive child-find effort. Products include a needs assessment report of services for children birth to age 5 years, a cooperative agreement document, and public awareness materials.

Arizona

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Gene Gardner	PHONE: (602) 255-3183
COORDINATOR:	Sara Robertson	PHONE: (602) 255-3183
PROJECT SPECIALIST:	Jo Ann Woodley	PHONE: (602) 255-3183
STATE PLAN GRANTEE ADDRESS:	Division of Special Education Arizona Department of Education 1535 West Jefferson Phoenix, Arizona 85007	
SPECIALNET USER NAME:	AEIZONASSES	
FISCAL AGENCY:	Arizona Department of Education Special Education Section	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Diane Peterson	PHONE: (602) 255-3183

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 21 years.

Permissive: age 3 to 5 years (in seven specific handicapping categories).

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To plan and develop a comprehensive service delivery system for children birth to age 2 years focusing on children in unserved geographical areas and where waiting lists exist.
- To develop identification and referral procedures for children birth to age 2 years, coordinating medical and educational services.
- To continue a study of Title VI-B discretionary and state funded preschool programs in public schools for children age 3 to 5 years.
- To bring parent groups at state, regional, and local levels into a technical assistance network to increase awareness and provide training.

INTERAGENCY COMPONENT:

The state departments of education and developmental disabilities formed an interagency agreement to promote development of a comprehensive service delivery system for children birth to age 2 years. An advisory committee, representing the State Health System for Newborns, Head Start, RAP IV, state universities, Pilot Parents, and other related federal projects, is facilitating further coordination and interagency collaboration.

FEATURES AND PRODUCTS:

Reports will include Phase I of an efficacy study addressing programming, costs, placement of children, follow-up data, and parent information. Results of a needs assessment for children birth to age 2 years will be collected and summarized. An information brochure for parents is being developed.

Arkansas

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Mary Kaye Curry PHONE: (501) 371-1686

STATE PLAN GRANTEE ADDRESS:
Arkansas Department of Education
Special Education
Arch Ford Building, Room 105-C
Little Rock, Arkansas 72201

SPECIALNET USER NAME: ARKANSASSE

FISCAL AGENCY:
Arkansas Department of Education
Special Education

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1984-86

STATE DIRECTOR OF SPECIAL EDUCATION: Diane Sydoriak PHONE: (501) 371-2161

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 6 to 21 years; age 5 to 21 years in school districts that have kindergarten classes.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- to continue developing interagency collaboration efforts.
- To determine the number of children (and their disabilities) who need services.
- To develop components needed in a comprehensive service delivery system.
- To develop and provide parent support services.

INTERAGENCY COMPONENT:

A multiagency committee is developing a state plan based on the results of the service needs assessment and five regional conferences. The planning committee consists of representatives from the Arkansas Departments of Education, Health, and Human Services; the state legislature (House and Senate); Head Start; private agencies; Arkansas Children's Hospital; Arkansas University; Arkansas Coalition for the Handicapped; and public schools.

FEATURES AND PRODUCTS:

One HCEEP outreach project in Arkansas will be used as a pilot demonstration site to show possible use of services. Local service providers will be invited to local conferences to help them identify available services.

California

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Nancy Obley-Kilborn PHONE: (916) 324-8417

COORDINATOR: Betsy Qualls PHONE: (916) 323-4762

STATE PLAN GRANTEE ADDRESS:
California Department of Education
Office of Special Education
721 Capitol Mall
Sacramento, California 95814

SPECIALNET USER NAME: CALIFORNIAOSE

FISCAL AGENCY:
California Department of Education
Office of Special Education

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Elizabeth Richland (acting) PHONE: (916) 445-4036

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 years for those requiring "intensive special education and services;" birth to age 3 years for those requiring intensive special education and related services in local education agencies that offered a program in 1980-81.

Permissive: birth to age 3 years for those requiring intensive special education and related services in local education agencies that did not offer a program in 1980-81.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a comprehensive service delivery system through enhanced state and local interagency and intra-agency coordination.
- To conduct needs assessments for infants and for preschoolers and a study of personnel needs and funds required for full services.
- To refine and expand administrative, management, and evaluation systems.
- To promote public awareness of and support for early intervention.

INTERAGENCY COMPONENT:

Collaboration exists between major state organizations and planning groups through the activities of the Child Development Programs Committee, California First Chance Consortium, and several task forces. Coordination is planned with related grants, an intra-departmental early education task force, and groups outside the state that impact on grant activities.

FEATURES AND PRODUCTS:

The advisory committee will plan four to six 2-day meetings. Reports will deal with eligibility for services, collaborative models, current services, and reviews of laws and regulations. Information/media packets will be produced. An "awareness week" will encourage interagency participation by state and local education agencies. A planning expert will devise an evaluation/feedback tool.

Colorado

TYPE OF GRANT: state plan grant (planning phase)

COORDINATOR: Nancy Sievers PHONE: (303) 866-6710

STATE PLAN GRANTEE ADDRESS: Special Education Services
201 E. Colfax Avenue
Denver, Colorado 80203

SPECIALNET USER NAME: COLORADOSESU

FISCAL AGENCY: Colorado Department of Education
Special Education Services

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Brian A. McNulty PHONE: (303) 573-3233

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.
Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To initiate a coordinated interagency planning process with all responsible state agencies to develop and implement a comprehensive system of early intervention services, including services needed during the prenatal period.
- To determine what aspects of a comprehensive system of services are in place and which alternative services are needed.
- To develop a process that will establish needed services with parental input and assure continuing assessment and diagnosis.
- To create a system for identifying and providing appropriate personnel preparation and training.
- To disseminate information throughout the state on available services and planning efforts.

INTERAGENCY COMPONENT:

Interagency focus will be coordinated through a state steering committee. Special emphasis will be placed on coordination with other federal special education grants and with state regional assistance teams working at the local level.

FEATURES AND PRODUCTS:

Activities of the project will be carried out by the project director, the Central Steering Committee, several task forces, and consultants.

Connecticut

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Virginia Volk PHONE: (203) 566-1961

STATE PLAN GRANTEE ADDRESS:
Connecticut Department of Education
Office of Planning, Box 2219
Hartford, Connecticut 06145

SPECIALNET USER NAME: CONNECTICUTBSS

FISCAL AGENCY:
Connecticut Department of Education
Office of Planning

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Tom B. Gillung PHONE: (203) 566-4383

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 (by January 1 of school year) to 21 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To assess needs of children under age 3 years and their families.
- To appoint a committee to plan interagency services.
- To cooperate with Yale University researchers on the fiscal impact of an early childhood (birth to age 3 years) service mandate.
- To study interagency service delivery systems in other states.
- To intensify state- and local-level collaborative efforts and recommend management and administrative roles for public and non-public agencies.
- To recommend to state agencies a multiagency service plan that includes policy, standards, and funding components.
- To recommend a plan for training families, caretakers, and professionals at state and local levels.
- To promote public awareness about early intervention services.

INTERAGENCY COMPONENT:

A study committee representing public and private organizations and institutions will guide grant activities. State-level participants include officials from the Departments of Mental Retardation, Health Services, Children and Youth Services, Human Resources, and Income Maintenance. Grant activities also will be coordinated with offices for the blind and child daycare, other federal education and research grants, and other public and private programs.

FEATURES AND PRODUCTS:

Staff will participate in a pilot project on Collaborative School-Based Child Health Services that enables schools to be reimbursed for some health services. An existing Study Committee will be expanded to work on a multiagency delivery system. This project will be coordinated with Preschool Incentive Grant activities and Child Find activities.

Delaware

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Carl M. Haltom PHONE: (302) 736-5471

COORDINATOR: Barbara E. Humphreys PHONE: (302) 736-4667

STATE PLAN GRANTEE ADDRESS:
Delaware Department of Public Instruction
Exceptional Children/Special Programs Division
Townsend Building, P.O. Box 1402
Dover, Delaware 19903

SPECIALNET USER NAME: DELAWAREECD

FISCAL AGENCY:
Delaware Department of Public Instruction
Exceptional Children/Special Programs Division

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Carl M. Haltom PHONE: (302) 736-5471

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: from birth for deaf, blind, deaf/blind, and autistic; age 3 to 21 years for mentally retarded and orthopedically impaired; age 4 to 21 years for all other handicaps.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To assess service needs and design an Early Childhood State Plan.
- To establish a planning committee that represents public and private service providers, parents, and advocacy groups.
- To secure administrative commitment for services and resources.
- To identify duplications and gaps in program standards among public and private service agencies.
- To implement a computerized child tracking system and data-based management system to serve public and private programs.
- To establish standards for service delivery.
- To promote public awareness about services and train professionals, caretakers, and families at state and local levels.
- To create linkages with other states and relevant groups.

INTERAGENCY COMPONENT:
The planning committee includes state directors of public health, mental health, mental retardation, developmental disabilities, and private agencies. Grant activities will be coordinated with P.L. 94-142 and its projects, including the Preschool Incentive Grant and Project Issues.

FEATURES AND PRODUCTS:
The Urban Affairs Department of the University of Delaware will assist with the needs assessment. A tracking system will be validated statewide to obtain data, spot gaps in service, and follow numbers of children served.

District of Columbia

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Maureen Thomas PHONE: (202) 724-4018

COORDINATOR: Jacquelyn Jackson PHONE: (202) 724-2141

STATE PLAN GRANTEE ADDRESS:
District of Columbia Public Schools
Division of Special Education and Pupil Personnel Services
10th & H Streets, N.W.
Washington, D.C. 20001

SPECIALNET USER NAME: D.C.DSE

FISCAL AGENCY: District of Columbia Public Schools

ADMINISTRATIVE AGENCY: District of Columbia Public Schools
Division of Special Education

PERIOD OF FUNDING: 1984-86

STATE DIRECTOR OF SPECIAL EDUCATION: Doris A. Woodson PHONE: (202) 724-4018

LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To identify interagency commitments for coordinated services to handicapped children birth to age 3 years and their families.
- To determine the number of handicapped children birth to age 3 years, their needs, and available services.
- To plan for the development of procedures and a design for an early childhood state plan.
- To plan training activities for families, caretakers, and professionals working with handicapped children birth to age 3 years.

INTERAGENCY COMPONENT:
Interagency commitments will be sought from hospital, pediatric, and child development clinics; programs serving children birth to age 3 years; Head Start; Department of Human Services; Department of Recreation; Visiting Nurses Association; HCEEP projects; and the Spanish Educational Development Center. Representatives of parent groups and agencies serving handicapped children will form working committees to investigate interagency coordination and various components of the early childhood state plan.

FEATURES AND PRODUCTS:
The project will develop needs assessment data, draft components of an early childhood state plan, develop plans for parent and professional training activities, and produce a public awareness brochure and a Birth-to-Three Services Provider Directory.

Florida

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Landis Stetler PHONE: (904) 488-1570

COORDINATOR: Gloria Dixon Miller PHONE: (904) 488-2054

STATE PLAN GRANTEE ADDRESS:
Florida Department of Education
Bureau of Education for Exceptional Students
Knott Building
Tallahassee, Florida 32301

SPECIALNET USER NAME: FLORIDABEES

FISCAL AGENCY:
Florida Department of Education
Bureau of Education for Exceptional Students

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-86

STATE DIRECTOR OF SPECIAL EDUCATION: Wendy Cullar PHONE: (904) 488-1570

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: kindergarten to grade 12.
Permissive: birth to kindergarten.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To use the Comprehensive State Plan to ensure access by all preschool children to education and related services.
- To improve and expand services with an emphasis on identification, parental involvement, public awareness, dissemination of interagency products, and availability of facilities and transportation.
- To continue to coordinate services with various state agencies to ensure local services without duplication or gaps.
- To develop family, child identification, and interagency model site components for the Comprehensive Plan.
- To identify financial resources.

INTERAGENCY COMPONENT:

The major advisory group will be the State Steering Committee for PreKindergarten Exceptional Programs. Assistance will be provided by related state steering committees, policy groups, councils, task forces, state universities, the Head Start Support Center, and YES, Inc. Collaborative efforts will be established with other federal grant activities in special education and health and rehabilitation.

FEATURES AND PRODUCTS:

Features include: 1) parent models for increasing family involvement; 2) projects to demonstrate interagency cooperation; 3) a statewide child identification system; and 4) definition of educational, medical and case management systems.

Georgia

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Rae Ann Redman	PHONE: (404) 656-2426
COORDINATOR:	Elizabeth T. Marr	PHONE: (404) 658-2310
STATE PLAN GRANTEE ADDRESS:	Program for Exceptional Children Georgia Department of Education 1970 Twin Towers East Atlanta, Georgia 30334	
SPECIALNET USER NAME:	GEORGIASPD	
FISCAL AGENCY:	Georgia Department of Education Division of Special Programs	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Joan A. Jordan	PHONE: (404) 656-2425

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 18 years.
Permissive: birth to age 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To design long-range planning efforts for comprehensive interagency service delivery and management systems for infants and preschoolers.
- To identify current and overlapping services in public and private agencies and future needs.
- To collaborate at state, regional, and local levels.
- To create a student information system.
- To increase public awareness.
- To establish training for families and caretakers who provide services.
- To identify financial and other resources.

INTERAGENCY COMPONENT:

Cooperative efforts are planned with other federal special education grant activities, including preschool incentives, P.L. 94-142, flow-through funded projects, and P.L. 89-313 programs. Linkages will be strengthened with the migrant education program, Department of Human Resources, Head Start, state colleges, Coordinating Council, State Advisory Panel for Special Education, Psychoeducational Program Network, and the Governor's Office of Planning and Budget.

FEATURES AND PRODUCTS:

State interagency planning will be guided by the Coordinating Council and the State Advisory Panel for Special Education. Project staff will assist in creating legislation and will provide data and cost projections to the Governor's office. Georgia State University will help with the needs assessment.

Territory of Guam

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: (to be appointed)

STATE PLAN GRANTEE ADDRESS:
Department of Education
Division of Special Education
P.O. Box DE
Agana, Guam 96910

FISCAL AGENCY:
Department of Education
Division of Special Education

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

DIRECTOR OF SPECIAL EDUCATION: Victoria Harper PHONE: 011 (671) 472-8906

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop an Early Childhood State Plan for a comprehensive service delivery system for handicapped and at-risk children under age 5 years.
- To complete a needs assessment with goals of developing a matrix of services, evaluation data, a high-risk registry, and a computerized client tracking system.
- To conduct public awareness programs for parents and professionals on the value of early intervention.
- To develop a multiagency diagnostic/referral center.
- To examine needs for legislation that would increase or improve interagency service delivery.

INTERAGENCY COMPONENT:

Grant activities will operate in conjunction with the Territorial Advisory Council of the Handicapped. Planning will involve representatives from state agencies now providing services or those that might offer services in the future. Collaboration is planned with all P.L. 94-142 programs.

FEATURES AND PRODUCTS:

Products and features include reports, interagency agreements, data forms, information packets, symposia, workshops, and a computerized tracking system. The Territorial Advisory Council will promote interagency cooperation, while the multiagency diagnostic/referral center will serve as the first point of contact for families and provide a complete array of services and training.

Hawaii

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Jo-Alyce K. Peterson PHONE: (808) 737-9859

COORDINATOR: Susan Brown PHONE: (808) 737-2564

STATE PLAN GRANTEE ADDRESS:
State of Hawaii Department of Education
Special Needs Branch
3430 Leahi Avenue
Honolulu, Hawaii 96815

SPECIALNET USER NAME: HAWAIISNB

FISCAL AGENCY:
Office of Instructional Services
Special Education Section

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Miles S. Kawatachi PHONE: (808) 737-3720

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 20 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To develop a comprehensive service delivery system for children prenatally through age 5 years, with primary attention to interagency collaboration, policy and legislation, parent and professional training, alternative funding sources, and public awareness.
- To conduct a statewide needs assessment to identify gaps, overlaps, and constraints in comprehensive service delivery and personnel training.
- To increase public awareness about the importance of comprehensive services.
- To establish an interagency advisory planning board and identify ways to increase interagency collaboration.

INTERAGENCY COMPONENT:
Ongoing state agency coordination will involve the departments of education, health, social services, and housing, along with the University of Hawaii. Resource Access Project of the Pacific will be active in preplanning activities with these agencies and with the university.

FEATURES AND PRODUCTS:
The Research Corporation of the University of Hawaii is fiscal manager of the grant. Products include reports that examine the status and comprehensiveness of services, fiscal and legislative alternatives, and administrative and management strategies that would facilitate services coordination.

Idaho

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Katherine Pavesic	PHONE: (208) 334-4181
COORDINATOR:	Paul Swatsenbarg	PHONE: (208) 334-4181
STATE PLAN GRANTEE ADDRESS:	Idaho Department of Health and Welfare Division of Community Rehabilitation 450 W. State Street, 10th Floor Boise, Idaho 83720	
SPECIALNET USER NAME:	IDAHOSE	
FISCAL AGENCY:	Department of Health and Welfare	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Martha Noffsinger	PHONE: (208) 334-3940

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 6 to 21 years.
Permissive: kindergarten.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To continue coordinating a statewide planning system.
- To develop local-level early childhood groups.
- To establish needs for direct service activities to special needs preschoolers.
- To develop procedures for improving the quality and quantity of paraprofessionals and professionals serving young special needs children.
- To improve evaluation of the effectiveness of Idaho's early intervention programs.

INTERAGENCY COMPONENT:

The Idaho Department of Health and Welfare has an interagency agreement with the Idaho Department of Education to provide services to handicapped preschoolers. An advisory panel will meet quarterly to help develop a system to coordinate state plan grant activities. The panel will include a parent, teachers, early childhood professionals, and legislators.

FEATURES AND PRODUCTS:

Products include: competency-based training materials within the vocational education system for paraprofessionals (to be field-tested in the next phase of the grant); a definition of "comprehensive" for each key component area and a summary of the statewide needs assessment; written information for conducting community meetings; and a bimonthly newsletter.

Illinois

TYPE OF GRANT:	state plan grant (planning phase)	
COORDINATOR:	Jonah Deppe	PHONE: (217) 782-6601
STATE PLAN GRANTEE ADDRESS:	Illinois Office of Education Department of Special Education Services 100 N. First Street Springfield, Illinois 62777	
SPECIALNET USER NAME:	ILLINOISDSES	
FISCAL AGENCY:	State Board of Education	
ADMINISTRATIVE AGENCY:	Illinois Office of Education Illinois Department of Special Education Services	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Joseph Fisher	PHONE: (217) 782-6601

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To complete planning for a comprehensive early childhood state plan.
- To summarize the history and authority of each public state agency providing services to children birth to age 5 years.
- To determine discrepancies between needs and available services.
- To compile, interpret, and disseminate needs assessment data.
- To promote awareness of project activities.

INTERAGENCY COMPONENT:
Three interagency groups will be formed during the project: (1) an Interagency Council (steering committee) of administrators from state agencies involved in services to handicapped children birth to age 5 years and a liaison from the governor's office; (2) an advisory council of representatives from service providers, professional groups, and parent organizations; and (3) a task force of staff members from state agencies serving handicapped children birth to age 5 years.

FEATURES AND PRODUCTS:
Each state agency's authority to provide services to handicapped children birth to age 5 years will be intensively reviewed. This will result in an analysis of the state's problems with differing terminology and incompatible service delivery areas. A needs assessment will be conducted concerning 11 areas of comprehensive service delivery. A state agency summary document and a needs assessment report will be developed.

Indiana

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Sara B. Clapp	PHONE: (317) 927-0216
COORDINATOR:	Marcia Johnson	PHONE: (219) 927-0239
PROJECT FACILITATOR:	Christina Isaacson	PHONE: (219) 927-0239
STATE PLAN GRANTEE ADDRESS:	Indiana Department of Education Division of Special Education 229 State House Indianapolis, Indiana 46204	
SPECIALNET USER NAME:	INDIANADSC	
FISCAL AGENCY:	Indiana Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Gil Bliton	PHONE: (317) 927-0216

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 6 to 18 years.
Permissive: age 3 to 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To conduct a comprehensive statewide needs assessment.
- To develop task forces that will address issues related to a comprehensive service delivery system for handicapped children birth to age 5 years.
- To increase statewide awareness of services for young handicapped children in Indiana.

INTERAGENCY COMPONENT:

Representatives from parent groups, higher education, the Mental Health Department, local education agencies, and the major state and local service providers to young handicapped children and their families form Indiana's 25-member Task Force on Early Childhood Special Education which will serve as the steering committee for the grant.

FEATURES AND PRODUCTS:

A needs assessment measuring all areas of a comprehensive delivery system will be conducted for Indiana by the National Association of State Directors of Special Education as subgrantee. A statewide directory of services for handicapped children birth to age 5 years will be developed.

Iowa

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Joan Turner Clary PHONE: (515) 281-3176

STATE PLAN GRANTEE ADDRESS:
Iowa Department of Public Instruction
Division of Special Education
Grimes State Office Building
Des Moines, Iowa 50319

SPECIALNET USER NAME: IOWASE

FISCAL AGENCY:
Iowa Department of Public Instruction
Division of Special Education

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: J. Frank Vance PHONE: (515) 281-3176

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To bring together agencies, parents, and other groups as part of the State Plan Advisory Council for Early Systems.
- To gather accurate, comprehensive data about current services from agencies, institutions, and patents.
- To construct and conduct an evaluation assessment to determine the status and needs of comprehensive service delivery systems for the target population.
- To conduct an Outreach Fair to increase public awareness on available service models.
- To award incentive grants to education agencies that want to replicate early intervention projects.

INTERAGENCY COMPONENT:
Emphasis is placed on maximizing programs and services for all eligible students statewide by integrating funding from all sources and evaluating the effectiveness of this integration.

FEATURES AND PRODUCTS:
Project staff use all available funding sources to enhance this grant. An outside agency will help plan, develop, and implement the needs assessment. Written reports will include computerized data summaries and will be disseminated widely.

Kansas

TYPE OF GRANT:	state plan grant (development phase)	
DIRECTORS:	Betty Weithers Luci Paden	PHONE: (913) 296-3869 (913) 296-7454
EDUCATION SERVICES COORDINATOR:	Suzanne Grant	PHONE: (913) 296-7453
PLANNING COORDINATOR:	Janelle Mulvenon	PHONE: (913) 862-9360
STATE PLAN GRANTEE ADDRESS:	Division of Special Education Administration 120 East 10th Street Topeka, Kansas 66612	
SPECIALNET USER NAME:	KANSASSE	
FISCAL AGENCY:	Kansas Department of Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	James E. Marshall	PHONE: (913) 296-4945

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.
Permissive: birth to age 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To coordinate the activities of education, health, and social services to ensure effective use of available resources and development of the state plan.
- To train parents for effective involvement in the comprehensive service delivery system.
- To increase public awareness of the need for early intervention and prevention.
- To continue development of the computerized service information system.

INTERAGENCY COMPONENT:

A Governor's Cabinet Subcommittee on Early Childhood Developmental Services has been established to ensure a formal system of interagency coordination. The position of Planning Coordinator, under the Department of Health and Environment, was established by interagency contract.

FEATURES AND PRODUCTS:

"Make a Difference" is the theme and logo of the interagency effort, which offers a computer-assisted service information directory, a toll-free information line, and a network of trained parent leaders. A brochure and radio campaign is publicizing these services. The State Plan has produced issue papers which have resulted in state legislation, and will establish pilot projects for regional services coordination.

Kentucky

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Betty Bright	PHONE: (502) 564-4970
COORDINATOR:	Jeffri Brookfield-Norman	PHONE: (606) 257-8281
STATE PLAN GRANTEE ADDRESS:	HDP-UAF University of Kentucky 210-A Porter Building Lexington, Kentucky 40506	
SPECIALNET USER NAME:	KENTUCKYSE or MSRRC	
FISCAL AGENCY:	Kentucky Department of Education	
ADMINISTRATIVE AGENCY:	HDP-UAF at the University of Kentucky	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Taylor Hollin	PHONE: (502) 564-4970

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 6 to 18 years.
Permissive: age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To assess the status of services.
- To identify components and establish a procedure and design for the development of an early childhood state plan, a comprehensive service delivery system, and a set of accepted (nonregulatory) standards.
- To increase public awareness.

INTERAGENCY COMPONENT:

Parents and professionals will serve on an advisory board that will contribute to and review project plans, reports, and activities. At least four sites will be selected to pilot interagency strategies.

FEATURES AND PRODUCTS:

A needs assessment will yield a computer list of state resources and a description of the status of each component of a comprehensive delivery system (to be compared to standards developed by the task force). A state directory of resources, a needs assessment summary document, standards for each component of a comprehensive delivery system, and a report describing procedures for the design of a state plan will be developed.

Louisiana

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Ronald Lacoste	PHONE: (504) 342-1641
COORDINATOR:	Dian Eubanks	PHONE: (504) 342-1641
STATE PLAN GRANTEE ADDRESS:	Joint Project for Parents and Children Services 3322 Florida Boulevard Baton Rouge, Louisiana 70806	
SPECIALNET USER NAME:	LOUISIANASE	
FISCAL AGENCY:	Louisiana Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Irene Newby	PHONE: (504) 342-3631

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To conduct a statewide assessment that will prioritize service delivery needs of public and private providers, parents, and others.
- To write state goals for the Louisiana Early Childhood Program that will be approved by a state agency steering committee.
- To assemble and analyze existing or needed information on the status of each of these state goals.
- To create a prioritized listing of needs required to establish a comprehensive service delivery system.
- To organize a statewide interagency steering committee.
- To form regional planning councils that will help with needs assessment, comprehensive planning, and information dissemination.

INTERAGENCY COMPONENT:

State-level coordination is planned with the Office of Public and Preventative Health Services, Handicapped Children's Services, Maternal and Child Health, LA Association for Retarded Citizens, Head Start, parents, and offices of mental retardation and developmental disabilities.

FEATURES AND PRODUCTS:

A state-level interagency steering committee will provide direction and support in identifying and serving all eligible children. Interagency councils have been established in each of the eight planning regions to facilitate comprehensive planning and assist in development of regional forums to obtain data on the needs of preschool handicapped children.

Maine

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Susan D. Mackey-Andrews	PHONE: (207) 289-5971
STATE PLAN GRANTEE ADDRESS:	Maine Department of Educational and Cultural Services Division of Special Education State House Station #23 Augusta, Maine 04333	
SPECIALNET USER NAME:	MAINESE	
FISCAL AGENCY:	Maine Department of Educational and Cultural Services Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	David N. Stockford	PHONE: (207) 289-5950

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 20 years (birthdate on or before October 10).
Permissive: age 3 to 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To complete an Interagency Model Efficacy Study and devise a working plan for selected state and local sites.
- To compile "best practices" for technical assistance programs.
- To present final program standards in regulatory form for inclusion in the State Administrative Procedures Act.
- To complete an impact study of two pilot prevention programs.
- To compile a statewide needs assessment, funding analysis, and study on capacity to be presented to state commissioners.
- To complete a study on alternatives for preschool incentive grant funds.
- To complete an effectiveness study on the Network Project.
- To complete a statewide child-find awareness campaign.

INTERAGENCY COMPONENT:
The Interdepartmental Coordinating Committee for Preschool Handicapped Children, which will direct the planning grant, represents the departments of Educational and Cultural Services, Human Services, and Mental Health and Mental Retardation. Since 1977, it has helped to develop the state's coordinated services system for preschool handicapped and at-risk children and their families.

FEATURES AND PRODUCTS:
A statewide, computerized Case Management Data Collection System is being installed. This system, which interfaces with and complements the State Plan Needs Assessment, will enable retrieval of information on children, services, funding, long-term planning capacity, and resource development. Interdepartmental preschool standards for programs and services and a technical assistance manual will be distributed.

Maryland

TYPE OF GRANT:	state plan grant (development phase)	
DIRECTOR:	Sheila Draper	PHONE: (301) 659-2499
COORDINATOR:	Janeen Taylor	PHONE: (301) 659-2498
STATE PLAN GRANTEE ADDRESS:	Maryland State Department of Education Division of Special Education 200 West Baltimore Street Baltimore, Maryland 21201	
SPECIALNET USER NAME:	MARYLANDDSE	
FISCAL AGENCY:	Maryland State Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-88	
STATE DIRECTOR OF SPECIAL EDUCATION:	Martha Fields	PHONE: (301) 659-2489

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 20 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To expand interagency collaboration through an Advisory Council, a Steering Committee, and professional and parent advisory networks.
- To improve programs by focusing on health and education issues, reviewing legislation, identifying exemplary interagency service models for the medically fragile and emotionally disturbed, and working with other state departments to develop policies on managing communicable diseases.
- To promote interagency collaboration at all levels by promoting and evaluating models for local consortia that involve parents.
- To develop and expand training materials related to parenting.
- To improve competencies of administrators and service providers through technical assistance, identifying transition models, encouraging adoption of outreach model components, and exploring appropriate technology.

INTERAGENCY COMPONENT:

Project activities will be coordinated with P.L. 94-142 Preschool Incentive Grant projects. Ongoing collaborative efforts will be continued among universities, 24 school systems, Departments of Human Services, Health, and Mental Hygiene, and public and private programs and associations.

FEATURES AND PRODUCTS:

A contract with Johns Hopkins University will help fulfill grant requirements. Materials in the resource library will circulate to schools, parents, and teachers in training. About 916 children birth to age 2 years, and over 5,800 students from age 3 to 5 years will be served.

Massachusetts

TYPE OF GRANT:	state plan grant (planning phase)	
COORDINATOR:	Irma Napoleon	PHONE: (617) 727-0600
CONSULTANT:	Trudy Sadeghpour	PHONE: (617) 970-7479
STATE PLAN GRANTEE ADDRESS:	Northeast Regional Center Department of Education 219 North Street North Reading, Massachusetts 01864	
SPECIALNET USER NAME:	MASPED	
FISCAL AGENCY:	Massachusetts Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Roger W. Brown	PHONE: (617) 770-7468

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 21 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To identify services for young children who are handicapped or at risk.
- To involve parents in planning a service delivery system for their handicapped children.
- To identify existing early childhood program guidelines.
- To select specific coordinated service tasks for the development phase.
- To increase public awareness of comprehensive service delivery needs.
- To identify regional and statewide resources that exist and determine need for additional resources.

INTERAGENCY COMPONENT:

Representatives from public and private service agencies and parent and advocacy groups will oversee and review project activities. Regional planning groups will direct regional needs assessments.

FEATURES AND PRODUCTS:

Regional needs assessment data will be compiled to draw conclusions about services to handicapped children birth to age 5 years, the availability and patterns of services, and the aspects of a comprehensive delivery system currently in place. The project will develop a needs assessment summary report, a document proposing strategies for developing a comprehensive delivery system, and a series of principles on specific program practices.

Michigan

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Jan Baxter PHONE: (517) 373-8215

STATE PLAN GRANTEE ADDRESS:
Michigan Department of Education
Special Education Services
P.O. Box 30008
Lansing, Michigan 48909

SPECIALNET USER NAME: MICHIGANSESA

FISCAL AGENCY:
Michigan Department of Education
Special Education Services

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Edward Birch PHONE: (517) 373-1695

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 25 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To evaluate legislation and the current status of state services children birth to age 5 years.
- To increase interagency collaboration and communication and devise a comprehensive plan for service delivery.
- To identify duplications and gaps in current services.
- To obtain a formal memorandum of agreement from the Human Services Cabinet supporting increased interagency collaboration, and to have the Interagency Task Force prepare service data and a management plan.
- To recommend teacher competencies, evaluation standards for teacher training programs, peer review procedures, techniques for curriculum improvement in personnel development programs, and action plans for training program improvement.
- To identify current needs and problems among direct services personnel and identify alternatives for professional development.

INTERAGENCY COMPONENT:

Coordination activities are organized within the Human Services Cabinet. Participants include officials from the Departments of Public Health, Social Services, and Mental Health. Linkages also are planned with local service providers including Head Start, the Perinatal Association, and Infant Mental Health Association.

FEATURES AND PRODUCTS:

Data reports, hearing testimony, conference summaries and written evaluations will be produced. A final report will provide detailed information on completed and ongoing activities.

Minnesota

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Norena Hale	PHONE: (612) 296-1793
COORDINATOR:	Anita Neumann	PHONE: (612) 296-7032
STATE PLAN GRANTEE ADDRESS:	Special Education Section Capitol Square Building 550 Cedar Street St. Paul, Minnesota 55101	
SPECIALNET USER NAME:	MN.SDE	
FISCAL AGENCY:	Minnesota Department of Education Special Education Section	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Norena Hale	PHONE: (612) 296-1793

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To promote the development of coordinated interagency systems.
- To provide resources to help local communities plan coordinated service systems.
- To clarify issues, define problems, and propose alternatives related to identification, diagnosis and assessment, service delivery systems, program evaluation, multi-agency staff development, interagency team staffing, parent/family involvement, in-service planning, and delivery of services in the least restrictive environment.

INTERAGENCY COMPONENT:

The Minnesota Departments of Education, Health, and Human Services have joined forces to promote state-level planning. A steering committee and advisory panel of representatives of public and private service providers and consumer and advocacy groups has been studying issues and will continue to make recommendations.

FEATURES AND PRODUCTS:

The steering committee recommended development of an interagency agreement that specifies state-level activities to encourage interagency collaborations. Based on a statewide needs assessment, the committee is developing components to serve as guidelines for local planning. Local early childhood intervention committees have been established by statute to plan for local, coordinated service delivery systems. The Plan Grant provides technical assistance through workshops, public information, and a quarterly newsletter promoting communication between state level and local service system planners.

Mississippi

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTORS:	Karen Hexton Robert Campbell	PHONE: (601) 359-3490 (601) 266-5162
COORDINATORS:	Becky Wilson	PHONE: (601) 266-5030
STATE PLAN GRANTEE ADDRESS:	University of Southern Mississippi Box 5163 - Southern Station Hattiesburg, Mississippi 39406-5163	
SPECIALNET USER NAME:	MISSISSIPPISES or UAPUSM	
FISCAL AGENCY:	Mississippi Department of Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Walter H. Moore	PHONE: (601) 359-3490

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 6 to 21 years.
Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To continue with a state-level interagency council to identify services and to develop a model to determine state needs.
- To continue with a local interagency council to develop, pilot, implement, and evaluate a model for local interagency planning.
- To have four established work groups collect and analyze information and materials for use in planning the state plan grant.
- To promote public awareness and disseminate information.

INTERAGENCY COMPONENT:

Two interagency councils have been established, one at the state level and one at the local level. The membership of these councils will include state and local service agencies and organizations, hospitals, university and university-affiliated programs, and parents. The state-level council will continue to create a knowledge base and formulate plans for developing a comprehensive service delivery system.

FEATURES AND PRODUCTS:

The project will host a statewide conference for local-level networking, develop a matrix of all services provided to handicapped preschool children throughout the state, and promote interagency collaboration models of state and local involvement. In addition, a referral system will be piloted at the local level.

Missouri

TYPE OF GRANT: state plan grant (planning phase)

COORDINATOR: Karen Campbell PHONE: (314) 751-3502
751-2965

STATE PLAN GRANTEE ADDRESS: Missouri Department of Elementary and Secondary Education
Division of Special Education
P.O. Box 480
Jefferson City, Missouri 65101

SPECIALNET USER NAME: MISSOURISE

FISCAL AGENCY: Missouri Department of Elementary and Secondary Education

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1984-86

STATE DIRECTOR OF SPECIAL EDUCATION: John Allan PHONE: (314) 751-4444

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 years.
Permissive: age 3 to 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To establish a 12-member interagency advisory council to advise the project coordinator regarding grant activities.
- To complete a comprehensive needs assessment.

INTERAGENCY COMPONENT:

The Missouri Departments of Elementary and Secondary Education, Mental Health, and Social Services will each name two representatives to serve on the state plan grant's advisory council. Also on the council will be six representatives from private agencies, parents, and higher education.

FEATURES AND PRODUCTS:

A comprehensive needs assessment will be conducted by a subgrantee and will address interagency efforts; systems for service administration; standards, regulations, and policies affecting comprehensive service delivery; state and local training efforts for families and professionals; financial resources; and state awareness activities. A final needs assessment report will be developed.

Montana

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Judith A. Johnson PHONE: (406) 657-2312

COORDINATOR: Roger E. Bauer PHONE: (406) 657-2312

STATE PLAN GRANTEE ADDRESS:
Eastern Montana College
Special Education Building
1500 N. 30th Street
Billings, Montana 59101-0298

SPECIALNET USER NAME: MONTANASS

FISCAL AGENCY: Office of Public Instruction

ADMINISTRATIVE AGENCY: Eastern Montana College (subcontract)

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Gail Gray PHONE: (406) 444-4429

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Permissive: preschool children.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop statewide identification and follow-up systems for providing appropriate services to neonates, infants, and preschoolers.
- To provide technical assistance to state and local personnel seeking to create or improve programs and to families desiring advocacy skills.
- To publicize programs through workshops, parent library materials, a toy exchange service, and a newsletter.
- To provide start-up grants to school districts.
- To assess the cost of providing services, formulate data-based criteria for future programs, and document regional service needs.
- To review and refine the state preschool implementation guide.
- To support legislation mandating early intervention services.

INTERAGENCY COMPONENT:

Collaborative activities are planned with the Office of Public Instruction, Social and Rehabilitation Services Department, Developmental Disabilities, Department of Health and Environmental Sciences, Office of Handicapped Children's Programs, Indian Health Services, and Indian Head Start.

FEATURES AND PRODUCTS:

Reports will be prepared on current practices and service delivery needs. Tracking and follow-up systems will be coordinated with training for public and private service providers, parents, and families. Workshops, a monthly newsletter, materials exchange, and training modules are also planned.

Nebraska

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Jan Thelen	PHONE: (402) 471-2471
STATE PLAN GRANTEE ADDRESS:	Nebraska Department of Education Special Education Office P.O. Box 94987 Lincoln, Nebraska 68509	
SPECIALNET USER NAME:	NEBRASKASE	
FISCAL AGENCY:	Nebraska Department of Education Special Education Office	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Gary M. Sherman	PHONE: (402) 471-2471

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To conduct various child tracking system activities designed to: 1) achieve consensus on child tracking data items, 2) design and implement a prototype system, and 3) train school district personnel on how to collect and report data.
- To conduct efficacy study activities that include: 1) continuing technical assistance with design, implementation, and computerization at three selected LEA sites; and 2) assisting sites with data analysis, reporting, and interpretation.

INTERAGENCY COMPONENT:

A special ad hoc committee of the Nebraska State Special Education Advisory Council (representing school districts, educational service units, multidistrict cooperatives, preschool planning regions, teacher training institutions, the University of Nebraska Medical Center, and the Nebraska Department of Education) will oversee and guide all project activities.

FEATURES AND PRODUCTS:

Nebraska is conducting three efficacy studies of early childhood services: a comparative study of services to children birth to age 3 years, and two longitudinal studies of school-age placements of children who received services before age 5 years. A legislative study linked to the State Plan Grant needs assessment will form the basis of a report on the early childhood special education delivery system.

Nevada

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Sharon Palmer	PHONE: (702) 885-3140
COORDINATOR:	Marilyn Walter	PHONE: (702) 789-0284
STATE PLAN GRANTEE ADDRESS:	Nevada Department of Education 400 W. King Street Carson City, Nevada 89701 or Nevada Department of Human Resources 480 Galletti Way Sparks, Nevada 89431	
SPECIALNET USER NAME:	NEVADASEB	
FISCAL AGENCY:	Nevada Department of Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Jane Early	PHONE: (702) 885-3100

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 21 years.
Permissive: birth to age 5 years for visual and hearing impaired; age 3 to 5 years for mentally retarded.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop an approved comprehensive state plan.
- To provide opportunities for communication activities that will help parents and professionals effectively implement state plan objectives.
- To develop awareness and support the plan.

INTERAGENCY COMPONENT:

The grant was submitted jointly by the Nevada Departments of Education and Human Resources. Both departments provide special education services to eligible handicapped children birth to age 6 years. Interagency Project Task Force membership includes state- and local-level representatives, representatives from urban and rural areas, parents, and professionals from universities and from Departments of Education, Health, Mental Hygiene, Mental Retardation, and Rehabilitation.

New Hampshire

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Robert T. Kennedy	PHONE: (603) 271-3741
COORDINATORS:	Barbara D. Bourgoine Luzanne B. Pierce	PHONE: (603) 271-3741
STATE PLAN GRANTEE ADDRESS:	New Hampshire Department of Education Special Education Section 101 Pleasant Street Concord, New Hampshire 03301	
SPECIALNET USER NAME:	NHSLATE	
FISCAL AGENCY:	New Hampshire Department of Education Special Education Section	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Robert T. Kennedy	PHONE: (603) 271-3741

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To assess comprehensive educational and related services needed by children birth to age 5 years and their families.
- To determine the degree of interagency collaboration at state and local levels and design an interagency state plan to improve different aspects of service delivery.
- To begin a data base on available services and refine the current child tracking system.
- To expand the statewide preschool communications network via print materials and regional support groups, and tap available talent for statewide training and public awareness activities.

INTERAGENCY COMPONENT:

Collaboration will be attempted with the Early Intervention Network, a statewide coalition of programs serving children birth to age 3 years. An Interagency Early Childhood Special Education Advisory Committee, parents, and consultants will also participate in collaborative efforts.

FEATURES AND PRODUCTS:

Products include an information-gathering report, participant evaluation form, and staff supervision plan. A final report to be issued at the end of year two will include: 1) service assessment report survey, 2) data base records, 3) Special Education Information System Report, and 4) the Advisory Committee's evaluation survey.

New Jersey

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Andrea C. Quigley PHONE: (609) 292-0147

STATE PLAN GRANTEE ADDRESS:
New Jersey State Department of Education
Bureau of Special Education and Pupil Personnel Services
225 West State Street/CN 500
Trenton, New Jersey 08025

SPECIALNET USER NAME: NEWJERSEYSE

FISCAL AGENCY:
New Jersey State Department of Education
Bureau of Special Education and Pupil Personnel Services

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Jeffrey Osowski PHONE: (609) 292-0147

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a framework for a comprehensive state plan for special education and related services for children under age 5 years.
- To assess preservice and inservice training needs for infant and early childhood professionals.
- To establish an Advisory Committee for guidance in developing the state plan.
- To describe and assess the continuum of current services by identifying gaps, overlaps, and future needs.
- To produce a written Interagency Agreement with the Departments of Health and Human Services for planning, developing, and implementing programs and services.
- To develop a plan to evaluate available services.

INTERAGENCY COMPONENT:
Interagency cooperation is mandated by a 1981 state law. At weekly meetings, the state Department of Education works with the Department of Health and Human Services to plan or enhance early intervention program activities.

FEATURES AND PRODUCTS:
A consultant will work with project staff to help evaluate existing services. Each of four task forces will produce written reports for inclusion in the State Plan. A statewide committee of parents and professionals will guide plan development. A needs assessment conference and interagency agreements will be facilitated by an outside expert. Data will be computerized.

New Mexico

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Louis Landry	PHONE: (505) 827-2575
COORDINATOR:	Louis Worley	PHONE: (505) 827-2581
STATE PLAN GRANTEE ADDRESS:	Developmental Disabilities Bureau P.O. Box 968 Sante Fe, New Mexico 87504-0966	
SPECIALNET USER NAME:	NEWMEXICOSE	
FISCAL AGENCY:	Health and Environment Department Developmental Disabilities Bureau	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Elie S. Gutierrez	PHONE: (505) 827-6541

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 21 years (3 to 21 years, pending legislative appropriation).

Permissive: birth to age 3 years (Health and Environment Department).

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To conduct a needs assessment of educational and related services for children birth to age 5 years.
- To design a state plan and a method for ongoing planning and evaluation.
- To devise collaborative agreements with state agencies to implement the planning grant.
- To develop an automated child referral system and a management system.
- To carry out a statewide print and broadcast public awareness campaign, with an initial emphasis on child find activities.
- To identify financial resources for implementing the state plan.

INTERAGENCY COMPONENT:

The Health and Environment Department, under a joint powers agreement with the state Department of Education, manages the grant and works cooperatively with the Chronically Impaired Children grant program operated out of the Governor's office; the state-funded Developmental Disabilities Planning Council; Parents Reaching Out (PRO); and primary state health providers. Linkages are being developed with federal Indian programs.

FEATURES AND PRODUCTS:

The design for an Early Childhood State Plan will include standards for identifying and evaluating children and for meeting personnel needs, a systematic planning process, public awareness materials, and interagency agreements. Several documents and an automated referral system are expected products.

New York

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Lawrence Gloeckler	PHONE: (518) 474-5548
COORDINATOR:	Michael Plotzker	PHONE: (518) 474-8917
STATE PLAN GRANTEE ADDRESS:	New York State Education Department Office for Education of Children with Handicapping Conditions Room 1061, Education Building Annex Albany, New York 12234	
SPECIALNET USER NAME:	NY.SE	
FISCAL AGENCY:	New York State Education Department	
ADMINISTRATIVE AGENCY:	New York State Education Department Office for Education of Children with Handicapping Conditions	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Lawrence Gloeckler	PHONE: (518) 474-5548

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 21 years.
Permissive: under age 5 years, by petition in Family Court.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop legislation that mandates services for young handicapped children (including subsequent regulation).
- To analyze current linkage and referral plans between tertiary and secondary perinatal centers, including other hospital clinics.
- To determine available coursework in early childhood special education at the preservice level.
- To coodinate activities with the Preschool Incentive Grant, Head Start, HCEEP projects, and the State Plan Officer.

INTERAGENCY COMPONENT:

Staff coordinates activities with state agencies for health, social services, and disabilities. Linkages will be made with federally funded projects, local service providers, the state's training network, a committee on parent education, and various advisory panels.

FEATURES AND PRODUCTS:

The project will focus on unidentified or underserved children. Expected legislation would mandate that school districts take responsibility for providing special education services to children at age 3 years. Staff will develop guidelines for program standards, review fiscal and programmatic resources, and investigate ways to increase public awareness of services.

North Carolina

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Janis Dellinger	PHONE: (919) 733-6081
STATE PLAN GRANTEE ADDRESS:	North Carolina Department of Public Instruction Division for Exceptional Children Raleigh, North Carolina 27611	
SPECIALNET USER NAME:	NCAROLINASE	
FISCAL AGENCY:	North Carolina Department of Public Instruction Division for Exceptional Children	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	E. Lowell Harris	PHONE: (919) 733-3921

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 17 years.
Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To work cooperatively with the Department of Human Resources, Head Start, and other agencies to determine data collection and other needs, including gaps in service on a county-by-county basis.
- To develop procedures for designing a full-service delivery plan for children under age 5 years.
- To develop a competency-based personnel training network to meet state, regional and local needs through inservice and area workshops, parent awareness sessions, and summer institutes.
- To develop a comprehensive information system on available services, stressing identification and tracking components.
- To design research on the cost effectiveness and long-range (eight to ten years) results of early intervention.

INTERAGENCY COMPONENT:

Cooperation will be sought with the Department of Human Resources, developmental day centers, Head Start, and private service providers. Linkage also will be established with the Council on Educational Services for Exceptional Children, Legislative Commission on Children with Special Needs, State Interagency Council on Education and Related Services, and professional groups.

FEATURES AND PRODUCTS:

Specific products include a design for a statewide service delivery plan, procedures and program standards, a data information system, a report on personnel competencies, and a research design for data collection.

North Dakota

TYPE OF GRANT:	state plan grant (development phase)	
DIRECTOR:	Shelby J. Niebergall	PHONE: (701) 224-2277
COORDINATOR:	Brenda K. Oas	PHONE: (701) 224-2270
STATE PLAN GRANTEE ADDRESS:	North Dakota Department of Public Instruction Special Education Division State Capitol Bismarck, North Dakota 58505-0164	
SPECIALNET USER NAME:	NDAKOTADSE	
FISCAL AGENCY:	North Dakota Department of Public Instruction Special Education Division	
ADMINISTRATIVE AGENCY:	North Dakota Department of Public Instruction Department of Health and Human Services	
PERIOD OF FUNDING:	1985-88	
STATE DIRECTOR OF SPECIAL EDUCATION:	Gary Gronberg	PHONE: (701) 224-2277

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a computerized interagency centralized registry/data management system.
- To explore the integration of additional services in the comprehensive service delivery system.
- To assist Head Start programs and special education units in developing local agreements defining services responsibilities and other cooperative efforts for children age 3 to 5 years.
- To provide technical assistance to professionals and families of handicapped children birth to age 5 years.
- To assess training needs, determine state priorities, and plan appropriate inservice activities.
- To continue the Early Childhood Education for Handicapped Infants and Children Advisory Committee.

INTERAGENCY COMPONENT:

Grant activities will be implemented under a multiagency agreement among the Departments of Health, Human Services, and Public Instruction.

FEATURES AND PRODUCTS:

Products and features include the North Dakota registry system, at least three advisory board meetings, local agreements between Head Start programs and public schools, and a training/technical assistance program.

Northern Mariana Islands

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTORS:	Daniel H. Nielsen Henry I. Saplan	PHONE: (011) 670-9590 (011) 670-9812
COORDINATOR:	Bobbi Figdor	PHONE: (011) 670-9311
STATE PLAN GRANTEE ADDRESS:	Department of Education for the Commonwealth of the Northern Mariana Islands Saipan, CM 96950	
SPECIALNET USER NAME:	COM.SE	
FISCAL AGENCY:	Northern Mariana Islands Department of Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
DIRECTOR OF SPECIAL EDUCATION:	Daniel H. Nielsen	PHONE: (011) 670-9590 670-9956

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To plan services for children who are not receiving services.
- To plan counseling and involvement for parents.
- To plan comprehensive evaluation of services.

INTERAGENCY COMPONENT:

The Department of Education will be subcontracting with: 1) the Handicapped Children's Resource Center to develop a plan for paraprofessional training; 2) the Protection and Advocacy Agency to develop a plan for parent counseling; and 3) the Crippled Children's Services to develop a plan for tracking children birth to age 5 years. Interagency agreements will be developed with the Departments of Public Health, Youth Services, and Education. An interagency group, established to act as an advisory council and task force, includes representatives from service providers and parents. A second interagency group will be formed to act as a steering committee. This group will be composed of administrators from agencies involved in services to handicapped children birth to age 5 years, as well as representatives from the legislature and the governor's office.

FEATURES AND PRODUCTS:

Special highlights of the project are: 1) Tutuhom I Tiningo (Where Learning Begins), a quarterly newsletter; 2) a technical assistance workshop for agencies providing services to children birth to age 5 years (the workshop will deal with medical needs of children, parent interaction/counseling, and the promotion of interagency collaboration); 3) child-find brochures and public awareness information in Chamorro and Carolinian, the local languages; and 4) a needs assessment report.

Ohio

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Jane Wiechel	PHONE: (614) 466-4950
STATE PLAN GRANTEE ADDRESS:	Ohio Department of Education Division of Education Services 65 S. Front Street Columbus, Ohio 43215	
SPECIALNET USER NAME:	OHIODSE	
FISCAL AGENCY:	Ohio Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Frank E. New	PHONE: (614) 466-2650

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.
Permissive: age 3 to 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To develop a comprehensive information system on available services.
- To refine local, regional, and statewide procedures for identification, referral, and reporting.
- To increase public awareness of the need for early intervention.
- To plan components of a comprehensive service delivery system.

INTERAGENCY COMPONENT:
Ohio will develop a model and sponsor regional meetings. An advisory committee of representatives from parent groups, state agencies, universities, and service providers will help develop and interpret the results of a survey regarding gaps and overlaps in services.

FEATURES AND PRODUCTS:
Regional in-service meetings will include sessions on refined child-find procedures, selecting and using child evaluation and assessment instruments, and the use of regional directories of evaluation services. Two statewide meetings also are planned. Directories of available educational evaluation, training, and technical assistance resources will be developed.

Oklahoma

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Edd Rhoades	PHONE: (405) 271-4471
COORDINATOR:	Susan Istre	PHONE: (405) 271-4471
STATE PLAN GRANTEE ADDRESS:	P.O. Box 53551 Oklahoma City, Oklahoma 73152	
SPECIALNET USER NAME:	OKLAHOMASE	
FISCAL AGENCY:	Oklahoma Department of Health Maternal and Child Health Service	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Jimmie L. V. Prickett	PHONE: (405) 521-3351

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 4 to 21 years; birth to age 3 years for deaf-blind and children failing to thrive (at least 50 percent delayed).

Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a plan for comprehensive early intervention services for handicapped children birth to age 5 years.
- To increase parents' capacities to meet the special needs of their high-risk infant.
- To develop and implement a transition program for high-risk infants which links their family, the neonatal intensive care unit (NICU), the community hospital, and community agencies.
- To inform health care, education, and social service providers about existing services for high-risk infants and their families.

INTERAGENCY COMPONENT:

A needs assessment is being conducted by the Oklahoma Commission on Children and Youth. Development activities include services provided by a multidisciplinary team to families of infants in NICU. Intervention which begins in the NICU is later coordinated with community resources.

FEATURES AND PRODUCTS:

A pilot hospital/community transition model of coordinated service provision for high-risk infants and their families uses models from HCEEP outreach projects WELCOME and OPTIMUS. A family needs assessment, guidelines regarding the criteria for referrals from NICUs and community hospitals, an assessment of the information needs of health-care providers, a continuing education course for nurses, and a directory of early intervention programs will be developed.

Oregon

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	William Moore	PHONE: (503) 838-1220
COORDINATOR:	Jane Toews	PHONE: (503) 838-1220
STATE PLAN GRANTEE ADDRESS:	Teaching Research Oregon State System of Higher Education 345 N. Monmouth Avenue Monmouth, Oregon 97361	
SPECIALNET USER NAME:	OREGONSE	
FISCAL AGENCY:	Teaching Research	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Mason D. McQuistan	PHONE: (503) 378-3598

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a needs assessment that will provide information on which to base the early childhood state plan.
- To identify and develop interagency collaborative efforts.
- To develop and maintain systems of management, regulations, legislation, and policy and financial resources.
- To create statewide awareness of services.

INTERAGENCY COMPONENT:

The project will coordinate its activities with the Early Childhood Intervention Council, established by the state legislature. A project advisory committee of representatives from education, mental health, Head Start, higher education, parents, and medical groups will help develop a needs assessment of components for comprehensive service delivery, interagency collaborative agreements, and an early childhood state plan.

FEATURES AND PRODUCTS:

The needs assessment will address 12 components of comprehensive service delivery. Further planning will use the approach set forth in The Community Workbook for Collaborative Services to Preschool Handicapped Children (Magrab, Kazuk, and Greene, 1981).

Pennsylvania

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Gary J. Makuch	PHONE: (717) 783-6913
COORDINATORS:	Rick Price Jill Lichty	PHONE: (717) 783-6913
STATE PLAN GRANTEE ADDRESS:	Pennsylvania Department of Education Bureau of Special Education 333 Market Street Harrisburg, Pennsylvania 17126-0333	
SPECIALNET USER NAME:	PA.SE	
FISCAL AGENCY:	Pennsylvania Department of Education Bureau of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Gary J. Makuch	PHONE: (717) 783-6913

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To examine the current status of services.
- To identify service delivery gaps and overlaps.
- To plan components of a comprehensive service delivery system.
- To make recommendations for program development through collaboration and coordination.

INTERAGENCY COMPONENT:

A state-level interagency council of representatives from the Departments of Health, Education, and Welfare will assist with a needs assessment of the components of a comprehensive service delivery system. The council will also help with the development of a state plan for preschool handicapped children and their families.

FEATURES AND PRODUCTS:

An interagency council will be an integral part of all phases of the needs assessment and development of a state plan. The project will develop a state plan, a tracking system compatible with each agency's current system, and guidelines for health and developmental screenings.

Rhode Island

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	J. Troy Earhart	PHONE: (401) 277-3505
COORDINATORS:	Joan Karp Thomas Kochanek	PHONE: (401) 456-8024 456-8599
STATE PLAN GRANTEE ADDRESS:	Rhode Island College Department of Special Education 600 Mt. Pleasant Avenue Providence, Rhode Island 02908	
SPECIALNET USER NAME:	RHODEISLANDSE	
FISCAL AGENCY:	Rhode Island Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Robert Pryhoda	PHONE: (401) 277-3505

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 5 years

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop a serial, multivariate screening process for children birth to age 5 years and their families.
- To develop a method to determine eligibility for special education and related services for children birth to age 5 years and their families.
- To develop a full continuum of educational and therapeutic services for children and families within a regionalized service delivery system.
- To develop the conceptual framework for automated client registration.

INTERAGENCY COMPONENT:

The Departments of Education, Health, Human Services, Children and Their Families, and Mental Health, Retardation, and Hospitals (MHRH) collaborate at the administrative level in model formulation. Staff from these departments participate in six interdisciplinary task forces. The Department of Education will develop an interagency agreement with the State Head Start program.

FEATURES AND PRODUCTS:

Task force subgroups will focus on six issue areas: child identification and assessment; services to children and their families; administration, public policies, regulations, and fiscal appropriations; longitudinal tracking system; personnel training and development; and interagency coordination. These subgroups will produce position papers at the end of the first year and a ten-year comprehensive plan for Rhode Island at the end of the second year. The project also will develop and field test an automated information management system.

South Carolina

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Robert S. Black	PHONE: (803) 758-6122
COORDINATOR:	Helen Geesey	PHONE: (803) 758-6122
STATE PLAN GRANTEE ADDRESS:	Office of Programs for the Handicapped South Carolina Department of Education 100 Executive Center Drive Santee Building, Suite A-245 Columbia, South Carolina 29210	
SPECIALNET USER NAME:	SCAROLINAOPH	
FISCAL AGENCY:	State Department of Education Office of Programs for the Handicapped	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Robert S. Black	PHONE: (803) 758-6122

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 18 years; age 4 to 18 years for visual and hearing impaired.

Permissive: birth to age 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To analyze factors necessary for comprehensive services.
- To conceptualize, through field research, appropriate links between education and other human services.
- To develop a comprehensive state plan.

INTERAGENCY COMPONENT:

The state education agency, the commissioners of the other human service agencies, and representatives of local school districts are involved in the state plan grant. Each subgrantee (three local school districts) will establish a local interagency advisory council, half of whose members will be parents of handicapped children. These local councils will conduct analyses of services needed.

FEATURES AND PRODUCTS:

Three districts representative of the state's demographic regions will conceptualize and plan replicable models. Each grantee will conduct a needs assessment and present annually its findings and recommendations to districts of similar size, population, and demographics.

South Dakota

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	George Levin	PHONE: (605) 773-3678
COORDINATOR:	Paulette Levisen	PHONE: (605) 773-3678
STATE PLAN GRANTEE ADDRESS:	South Dakota Division of Education Section for Special Education 700 North Illinois Pierre, South Dakota 57501	
SPECIALNET USER NAME:	SDAKOTASSE	
FISCAL AGENCY:	South Dakota Division of Education Section for Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	George Levin	PHONE: (605) 773-3678

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To develop, coordinate, and expand interagency efforts and create a state plan for comprehensive service delivery.
- To conduct a needs assessment that focuses on identification, assessment, placement, services, staff development, and parent needs.
- To design policy statements in eight areas, issuing administrative rules as necessary.
- To select systems for data collection, management, and evaluation.
- To create a comprehensive interagency agreement, and to promote interagency coordination of services by providing resources such as federal incentive grant funds and workshops.

INTERAGENCY COMPONENT:

Local level collaboration will continue at five model sites. Financial incentives for replication are planned. Agreements with the folowing agencies will be reviewed for possible updating: Crippled Children's Hospital and School, Region VIII HCYF, Department of Health, Board of Regents, SSI-DC Program, and the Bureau of Indian Affairs. New state-level linkages will be explored.

FEATURES AND PRODUCTS:

Features and products include an Early Childhood State Plan formulated with the help of a steering committee; a draft of this plan will be presented to the State Board of Education. A state-level interagency agreement will be developed that focuses on providing services and on developing an evaluation system for local interagency projects.

Tennessee

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Karen Edwards	PHONE: (615) 741-2633
COORDINATOR:	Mary Porter	PHONE: (615) 741-2633
STATE PLAN GRANTEE ADDRESS:	Tennessee Children's Services Commission Suite 1600, James K. Polk Building 505 Deaderick Nashville, Tennessee 37219	
SPECIALNET USER NAME:	TENNESSEESE	
FISCAL AGENCY:	Tennessee Department of Education Division of Special Programs	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	JoLeta Reynolds	PHONE: (615) 741-2851

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 4 to 21 years; from age 3 years, if deaf.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To build interagency consensus about services to handicapped children and high-risk infants and their families.
- To design and receive approval for a state plan reflecting shared service delivery responsibilities of four primary state agencies.
- To expand the Preschool Services Planning Committee, establish a Parents' Advisors Committee and work with the Governor's Healthy Children Task Force.
- To disseminate information about early intervention and diagnosis.
- To coordinate, strengthen, and maintain in a continuum all services that identify, assess, diagnose, and serve children.
- To continue work with the Preschool Analysis Project at Vanderbilt University to develop a system for evaluating program effectiveness.

INTERAGENCY COMPONENT:
Interagency coordination will involve state and local agencies, parents, physicians, and related associations and groups. Participants will represent the governor's office; state departments for education, health and human services; local public and private service providers; and Head Start.

FEATURES AND PRODUCTS:
Proposed products include a report on a pilot study of coordinated community approaches to early identification; a guide on conditions that place children at risk; a directory of diagnostic, treatment, and essential early intervention services; and state agency contributions to the State Plan. The Tennessee Children's Services Commission is coordinating planning activities.

Texas

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Mary O. Elder	PHONE: (512) 465-2671
COORDINATOR:	Donna Derkacz	PHONE: (512) 456-2671
STATE PLAN GRANTEE ADDRESS:	Texas Department of Health Early Childhood Intervention Program 1101 West 49th Street Austin, Texas 78756	
SPECIALNET USER NAME:	TEXASSE	
FISCAL AGENCY:	Texas Department of Health	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Don Weston	PHONE: (512) 475-3501

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 21 years; birth to age 2 years for visually impaired, hearing impaired, and deaf-blind; comprehensive services birth to age 6 years for children with developmental delays.

Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To design a comprehensive, coordinated data collection system for children birth to age 6 years with developmental delays or at risk of developmental delay.
- To design an early childhood state plan.

INTERAGENCY COMPONENT:

In 1981, the Texas Legislature established the Early Childhood Intervention Program to develop a statewide system to identify and provide services to children birth to age 6 years at risk for, or with, developmental disabilities. Four agencies (Texas Education Agency, Department of Human Resources, Department of Mental Health and Mental Retardation, and Department of Health) and a parent appointed by the governor were designated to form an Interagency Council for Early Childhood Intervention. Their charge was to establish policies and procedures to ensure successful implementation of authorizing legislation.

FEATURES AND PRODUCTS:

The project will develop a computerized statewide identification system for child identification and ensurance of appropriate service.

Trust Territory of the Pacific

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Winney H. Kuartei PHONE: (011) 671-9312

STATE PLAN GRANTEE ADDRESS:
Special Education Program
TTPI Department of Education
P.O. Box 27 CHRB
Capitol Hill
Saipan, CM 96950

FISCAL AGENCY:
Special Education Program
TTPI Department of Education

ADMINISTRATIVE AGENCY: Office of the High Commissioner

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Winney H. Kuartei PHONE: (011) 671-9312

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated:
Permissive:

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To design a multiagency service delivery model in the State of Yap for children birth to age 5 years who currently do not receive services.
- To design systematic education and counseling programs for the parents of unserved children.
- To design an evaluation system to assess the benefit of grant activities.
- To ascertain public and private agency strengths and weaknesses, as well as needed educational and related services.
- To facilitate the development of legislation.

INTERAGENCY COMPONENT:
State and local education officials will participate in planning activities and will supply needed information, technical assistance, and related support services. Input is expected from the public health and vocational rehabilitation departments, Head Start, day care providers, Advisory Council for the Handicapped, Community College of Micronesia, Western Pacific Special Education Consortium/Early Intervention Project, MCH Project, and others.

FEATURES AND PRODUCTS:
Reports will include an interagency contact list, a description of current and needed services, demographic information, status of current legislation, agency policies, training opportunities, and cost data. Interagency agreements are anticipated during the first years. Data collected will be entered into a computerized system. A variety of public awareness and advocacy activities are planned.

Utah

TYPE OF GRANT:	state plan grant (planning phase)	
CO-DIRECTORS:	Peter Van Dyck Bruce Griffin Gary Nakao	PHONE: (801) 538-6161
COORDINATOR:	Jerry Christensen	PHONE: (801) 538-6905
STATE PLAN GRANTEE ADDRESS:	Handicapped Children's Services P.O. Box 16700 Salt Lake City, Utah 84116-0700	
SPECIALNET USER NAME:	UTAHSES	
FISCAL AGENCY:	Utah Department of Health	
ADMINISTRATIVE AGENCY:	Joint Interagency Coordinating Committee	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	R. Elwood Pace	PHONE: (801) 533-5982

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To assess educational and related services.
- To establish a design for the development of a state plan.
- To identify and describe administrative and programmatic resources.
- To identify, develop, and maintain systems to enhance management and administration of services.
- To establish and maintain standards for making services available.
- To provide statewide awareness of services for handicapped children.
- To help plan, develop, and implement training for families, caretakers, and professionals at state and local levels.
- To establish criteria to evaluate planning activities.

INTERAGENCY COMPONENT:

The Departments of Health, Education, and Social Services make up the project's Joint Interagency Coordinating Committee (JICC). A representative from each agency serves as a co-director of the project, and together they form the project's management board which reports to the JICC. The project also has an interagency advisory board consisting of parents, preschool providers, and representatives from various agencies.

FEATURES AND PRODUCTS:

A memorandum of agreement has been drawn up between the Departments of Health, Social Services, and Education.

Vermont

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Marc Hull	PHONE: (802) 828-3141
COORDINATOR:	Kristin Hawkes	PHONE: (802) 828-3141
STATE PLAN GRANTEE ADDRESS:	Vermont Department of Education Division of Special and Compensatory Education 120 State Street Montpelier, Vermont 05602	
SPECIALNET USER NAME:	VERMONTSE	
FISCAL AGENCY:	Vermont Department of Education Division of Special and Compensatory Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1984-86	
STATE DIRECTOR OF SPECIAL EDUCATION:	Theodore Riggen	PHONE: (802) 828-3141

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 6 to 22 years.
Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To conduct various assessments of statewide needs and resources for components of a comprehensive delivery system.
- To develop an essential early childhood state plan
- To develop a variety of materials to facilitate the development of quality programs for preschool handicapped children and their parents.
- To develop cooperative agreements.
- To plan a system to evaluate the effectiveness of early intervention.

INTERAGENCY COMPONENT:
Effectiveness of existing local agreements will be examined. Problem areas and areas in which new agreements are needed will be addressed.

FEATURES AND PRODUCTS:
A needs assessment of current programs, parent services, manpower needs, and personnel development will be conducted. The project will develop a state plan that addresses components of a comprehensive service delivery system, a resource handbook, a guide to curricula, a parent handbook, transition procedures, a plan for two evaluation systems (program and child progress), and revision of program guidelines.

Virgin Islands

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Priscilla Stridiron	PHONE: (809) 774-4399
STATE PLAN GRANTEE ADDRESS:	Department of Education Division of Special Education P.O. Box 6640 St. Thomas, U.S. Virgin Islands 00801	
SPECIALNET USER NAME:	VI.SE	
FISCAL AGENCY:	Department of Education Division of Special Education	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
DIRECTOR OF SPECIAL EDUCATION:	Priscilla Stridiron	PHONE: (809) 774-4399

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To promote interagency cooperation to ensure identification and provision of services, including family training and counseling, at the earliest age possible.
- To establish an interagency council services agreement (approved by the education commissioner) that includes a program for personnel development, community awareness, and parent education.
- To establish a child identification system for at-risk and handicapped children.
- To offer services to children in conjunction with technical assistance to families and preschool teachers.
- To conduct an evaluation of interagency strategies.
- To develop a Quantifiable Evaluation Plan.

INTERAGENCY COMPONENT:

The state education department plans cooperative efforts with officials from the Departments of Maternal and Child Health/Community Health, day care providers, Lutheran Social Services, Commission on the Handicapped, Community Action Agency, and the College of the Virgin Islands. An existing agreement between the state education agency and Head Start that will remain in effect throughout the grant period.

FEATURES AND PRODUCTS:

Features include purpose statements, interagency agreements, several needs assessments, a computerized tracking checklist, other data sheets, evaluation reports, and dissemination.

Virginia

TYPE OF GRANT: state plan grant (planning phase)

MANAGER: Andrea Lazzari PHONE: (804) 225-2873

STATE PLAN GRANTEE ADDRESS:
State Department of Education
Division of Special Education Programs and Pupil/Personnel Services
P.O. Box 6Q
Richmond, Virginia 23216

SPECIALNET USER NAME: VIRGINIADSE

FISCAL AGENCY:
State Department of Education
Division of Special Education Programs and Pupil/Personnel Services

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1984-86

STATE DIRECTOR OF SPECIAL EDUCATION: N. Grant Tubbs PHONE: (804) 225-2402

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 2 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:
- To assess the educational and related services available to handicapped children birth to age 5 years and their families.
- To obtain maximum input from significant and relevant groups.
- To plan for future development of a central data registry and a single-point-of-contact referral service.

INTERAGENCY COMPONENT:
An interagency group will review progress toward the the project's objectives. Seventy local needs assessments will include participants from the public and private sectors, related service professionals, consumers, higher education, and the medical community. Interagency activities will lay the foundation for the expansion and revision of the current state plan.

FEATURES AND PRODUCTS:
Statewide and regional service delivery matrices will be generated based on the data collected at the local forums. Issue papers will be developed on four topical areas: underserved preschool handicapped children; underrepresented preschool handicapped children; services for children birth to age 2 years; and transition to and from preschool handicapped programs.

Washington

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Susan Baxter	PHONE: (206) 753-1233
COORDINATOR:	Joan Gaetz	PHONE: (206) 753-0317
STATE PLAN GRANTEE ADDRESS:	Division of Children and Family Services Mail Stop OB-41 Olympia, Washington 98504	
SPECIALNET USER NAME:	WASHINGTONDSS	
FISCAL AGENCY:	Superintendent of Public Instruction Division of Special Services	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Greg Kirsch	PHONE: (206) 753-6733

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 3 to 5 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To ensure comprehensive, coordinated services to young children birth to age 6 years and their families.
- To maintain a state-level interagency committee to help state and local agencies provide comprehensive services.
- To develop and implement a comprehensive state-level needs assessment focusing on identification, program accessibility, continuing assessment, appropriateness of services, program options, parent involvement, personnel development, interagency collaboration, enabling legislation, and funding issues.
- To identify and put in place as many as ten local interagency coordinating teams to begin a community-based needs assessment.

INTERAGENCY COMPONENT:

A steering committee and task force will maximize cooperation with all agencies and institutions that have interest in and responsibility for children age birth to age 6 years. Coordination is planned for activities relating to P.L. 94-142 and the Preschol Incentive Grant.

FEATURES AND PRODUCTS:

Activities will include regional awareness and training conferences to introduce planning and coordination models from other states. Local planning teams will be established to guide program development. A needs assessment will examine legislative support, eligibility criteria, funding mechanisms, and service overlaps or gaps among agencies.

West Virginia

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Mary Pat Farrell (acting) PHONE: (304) 348-8830

STATE PLAN GRANTEE ADDRESS:
West Virginia Department of Education
Office of Special Education Effectiveness
Building 6, Room B-309
Capitol Complex
Charleston, West Virginia 25305

SPECIALNET USER NAME: WVIRGINIAOSE

FISCAL AGENCY:
West Virginia Department of Education
Office of Special Education Effectiveness

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: William Capehart PHONE: (304) 348-8830

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 23 years; age 3 to 23 years for the severely handicapped.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To design a Comprehensive State Plan to deliver special education and related services to children birth to age 5 years.
- To increase statewide awareness about benefits of existing and potential services, and about the long-term effect of early intervention.
- To assess the current status of and specific needs for comprehensive services.
- To establish a statewide child tracking system for preschoolers.
- To work closely with the State Interagency Preschool Advisory Council in developing interagency agreements needed to plan a comprehensive service delivery system and increase public awareness.

INTERAGENCY COMPONENT:

Interagency cooperation will be fostered by the State Interagency Preschol Advisory Council and by professional organizations with expertise in serving handicapped preschool children.

FEATURES AND PRODUCTS:

The project will produce a needs assessment and reports on existing services, resources, and needs. The project will also stimulate interagency cooperation at the county level. Through improved management, current services are expected to improve in quality and become more accessible.

Wisconsin

TYPE OF GRANT: state plan grant (planning phase)

DIRECTOR: Betty J. Rowe PHONE: (608) 266-6981

COORDINATOR: Jenny Lange PHONE: (608) 267-9172

STATE PLAN GRANTEE ADDRESS:
Wisconsin Department of Public Instruction
Division for Handicapped Children and Pupil Services
P.O. Box 7841
Madison, Wisconsin 53707

SPECIALNET USER NAME: WISCONSINDHC

FISCAL AGENCY:
Wisconsin Department of Public Instruction
Division for Handicapped Children and Pupil Services

ADMINISTRATIVE AGENCY: same

PERIOD OF FUNDING: 1985-87

STATE DIRECTOR OF SPECIAL EDUCATION: Victor J. Contrucci PHONE: (608) 266-1649

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 5 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To assess educational and related services available to or needed by children birth to age 5 years.
- To create an Early Childhood State Plan in cooperation with the State Department of Health and Social Services.
- To conduct a needs assessment using a matrix form, with help from a 20-member task force and consortium of state and local representatives.
- To identify the need for interagency agreements, legislation, policies, and administrative systems for special education and related services.
- To identify financial resources for identifying, evaluating, and educating children.
- To develop a dissemination system to increase awareness of services.

INTERAGENCY COMPONENT:

Needs assessment procedures and planning activities will involve major organizations, agencies, and institutions that currently provide educational and related services.

FEATURES AND PRODUCTS:

Project staff will use a specially designed instrument to gather information about 13 critical service components at state and local levels. The Early Childhood State Plan will require coordination among the plan approval group, advisory committee, the needs assessment task force, and a consortium of interested individuals and groups.

Wyoming

TYPE OF GRANT:	state plan grant (planning phase)	
DIRECTOR:	Carol Nantkes	PHONE: (307) 777-7414
COORDINATOR:	Armena Rooney Taylor	PHONE: (307) 766-5103
STATE PLAN GRANTEE ADDRESS:	University of Wyoming Box 3114, University Station Laramie, Wyoming 82071	
SPECIALNET USER NAME:	WYOMINGOHC	
FISCAL AGENCY:	University of Wyoming (subcontract)	
ADMINISTRATIVE AGENCY:	same	
PERIOD OF FUNDING:	1985-87	
STATE DIRECTOR OF SPECIAL EDUCATION:	Carol Nantkes	PHONE: (307) 777-7414

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Permissive: birth to school age.

MAJOR OBJECTIVES AND PURPOSES FOR 1985-1986:

- To report the state of the art of services for early childhood.
- To determine discrepancies between needs and available services.
- To report the state of the art on assessment tools and techniques for early childhood.
- To identify interagency commitments for coordinated services at state and local levels.
- To continue to provide technical assistance to early childhood programs.
- To plan the design of a comprehensive state plan for children, birth to age 6 years.

INTERAGENCY COMPONENT:

Three levels of interagency activity are proposed. A steering committee of state agency administrators will review services and make recommendations. An advocacy council representing the state, parents, and services providers will assist with the needs assessment. Subgroups will help with program development.

FEATURES AND PRODUCTS:

To promote interagency cooperation, officials attended a two-day Intermountain Interagency Inservice Institute where an advisory council, subcommittee, and a steering committee were selected.

CIREEH

Carolina Institute for Research on Early Education of the Handicapped

ADDRESS: 301 NCNB Plaza
Chapel Hill, North Carolina 27514
PHONE: (919) 962-2001

FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

PRINCIPAL INVESTIGATOR: James J. Gallagher
COORDINATORS: Jean W. Gowen and Gail S. Huntington

MAJOR OBJECTIVES:

- To conduct three coordinated five-year research projects that focus on the families of young moderately and severely handicapped children birth to age 5 years.
- To develop training and intervention materials to be used by parents and professionals.
- To disseminate materials, results from the research projects, and other institute papers on families of handicapped children.
- To train graduate students to research families of handicapped children.
- To coordinate activities of this institute with those of the other HCEEP early childhood research institutes.

MAJOR ACTIVITIES:

The purpose of the Fathers Present/Fathers Absent project is to identify both informal and formal sources of support that contribute to successful adaptation in two-parent and single-parent families of young handicapped children. Through a series of studies, the project addresses six objectives: 1) to compare families of young handicapped and nonhandicapped children on levels of support, stress, and family adaptation to the child; 2) to compare maternal and paternal adaptation to their handicapped child; 3) to assess the immediate and longitudinal contributions of different types of paternal support to successful child and family adaptation in two-parent families of young handicapped and nonhandicapped children; 4) to identify both informal and formal sources of support related to successful adaptation in single-parent and two-parent families of young handicapped children; and 5) to assess the generalizability of selected findings from North Carolina studies to families of handicapped children in different geographic areas of the country. Two hundred and sixty-five parents are participating in the North Carolina longitudinal studies. An additional 400 families also were assessed on a single occasion at selected sites throughout the United States.

The Parent-Child Reciprocity Project is investigating longitudinally the effectiveness of an intervention program designed to sensitize parents to the unique interactive capabilities of their handicapped infants. It is expected that these parents will feel more positively about their interactions with their infants, will establish more synchronous interaction patterns with them, will promote more advanced levels of play, and will undergo less of the withdrawal and psychological stress experienced by parents without such training. The objectives of the project are 1) to assess both the short- and long-term effects of the intervention; and 2) to provide descriptive data on interaction

of mothers and their handicapped infants and on the play behavior of handicapped infants. Infants and their parents are assessed four times over 16 months. Subjects enter the study at different, but selected, chronological ages: normally developing infants at age 6 months and handicapped infants at age 10 to 12 months, depending on time of referral.

The F.A.M.I.L.I.E.S. project (Family Assessment, Monitoring of Intervention, and Longitudinal Investigation of Effectiveness Studies) is developing and implementing a comprehensive system of assessing and monitoring the status and progress of families involved in early intervention for a handicapped infant. Through multivariate procedures, it is expected that the joint and interactive contributions of many factors can be evaluated and those which are uniquely predictive of effectiveness can be identified. During the first two years of the project, descriptive information was gathered with repeated measures on 100 families participating in a statewide home-based infant intervention program. During the third year, a functional model for planning, implementing, and evolving individualized family services in early intervention was developed. Now in its fourth year, the project is conducting a statewide implementation study to assess the effectiveness of this model in goal setting, service provision, goal attainment, and family outcome.

RESOURCES AVAILABLE:

The CIREEH I Final Report (limited supply), CIREEH I abstracts, Announcement of CIREEH II, CIREEH II Annual Report for Year 3, and a CIREEH II publications list are available from the institute. Other available publications are listed in the CIREEH I abstracts and CIREEH II publications list.

Early Childhood Research Institute

ADDRESS: University of Pittsburgh
Western Psychiatric Institute
and Clinic
3811 O'Hara Street
Pittsburgh, Pennsylvania 15213
PHONE: (412) 624-2012

FISCAL AGENCY: University of Pittsburgh

PRINCIPAL INVESTIGATOR: Phillip S. Strain PHONE: (412) 624-0349
ASSISTANT DIRECTORS/
COORDINATORS: Linda Cordisco, Howard Goldstein, Scott McConnell, John McGonigle, Diane Sainato, Vincent Van Hasselt

MAJOR OBJECTIVES:

- To develop procedures for assessing and teaching social and related skills to severely handicapped preschool children so they may participate successfully in instructional settings with nonhandicapped or less handicapped children.
- To develop treatment procedures that will eliminate disruptive behavior and produce behavior gains in the areas of social interaction, language development, and independent work and play skills.
- To develop training procedures to produce gains in parenting skills.
- To validate treatment gains by assessing if severely handicapped children who receive these treatments in a preschool classroom will be placed in environments less restrictive than environments receiving similar children who participate in other preschool programs. The experimental and comparison groups of preschool children will be assessed and compared: a) during their preschool years, to compare child progress; b) following placement in public schools, to compare follow-up progress and the restrictiveness of placement; and c) in the home (during and after preschool treatment), to assess changes in family stress, insularity from the community, and depression as functions of treatment.

MAJOR ACTIVITIES:

Year Three of the Early Childhood Research Institute marked the beginning of a three-year validation study. This study will test the effects of empirically derived treatments in the social, communicative, independent performance, disruptive behavior, and parent training areas. In addition to the validation study, research in five skill areas will continue to refine treatment procedures. The following are specific research activities for Year Four:

- The use of peer initiation interventions with blind multihandicapped preschool children.
- The experimental evaluation of procedures to promote generalization of social interaction skills.
- Peer-mediated interventions to enhance communicative interaction among normally developing and handicapped preschoolers.

- Acquisition and generalization effects of incidental language teaching at home and at school.
- The use of "training in sufficient exemplars" procedures to increase setting generalization in parents.
- Training young handicapped children to self-assess, self-manage, and self-reinforce during independent seat-work time.
- Comparing the effectiveness of visual screening and differential reinforcement of other behavior (DRO) on the reduction of stereotypes in preschool handicapped children.
- The development of a rating scale for stereotypic behavior.

Early Intervention Effectiveness Institute

ADDRESS: Developmental Center for Handicapped Persons
Utah State University
Logan, Utah 84322-6870

PHONE: (801) 750-2029

FISCAL AGENCY: Utah State University

DIRECTOR: Karl R. White
COORDINATORS: Stacy Mott, James Pezzino, and Carol Tingey

MAJOR OBJECTIVES:

- To examine the immediate and long-term effects and costs of early intervention with handicapped children by conducting six longitudinal studies in which one group of children receiving comprehensive intervention services is compared to another group of children receiving minimal or no intervention services.
- To investigate what impact age at start has on immediate and long-term effects and costs of early intervention by conducting five studies in which one group of handicapped children begins intervention services at an earlier age and the second group begins at a later age.
- To investigate the immediate and long-term effects and costs of systematically varying types of intervention by conducting five studies in which children participating in alternative types of intervention are compared (e.g., home-based vs. center-based, parent involvement vs. no parent involvement, segregated vs. mainstreamed).
- To develop and pilot-test a data collection/evaluation system which can be used on a nationwide basis for collecting information about the type of intervention provided, costs of the intervention, and effects of the intervention.
- To demonstrate the feasibility of field-based research which utilizes randomized designs, impartial data collection, economic evaluation, and verification of treatment implementation.

MAJOR ACTIVITIES:

During the first year, the project will determine the sites that will participate in the 16 longitudinal studies and finalize the format and procedures for economic evaluation, verification of treatment implementation, and assessment of child and family outcomes. Substantial attention will be devoted to selecting the assessment instruments that will yield the best information about the effects of intervention programs. Finally, a series of feasibility studies will be conducted in which the procedures referred to above will be implemented and refined. Studies to be initiated in October 1986 will include children with a wide range of handicapping conditions, including severely handicapped, hearing-impaired, and visually impaired children. All studies will utilize randomized designs and will include an economic evaluation component.

RESOURCES AVAILABLE:

Technical assistance in research design and analysis, and training in economic evaluation are available from the project.

Early Intervention Research Institute

ADDRESS: Developmental Center for Handicapped Persons
Utah State University
Logan, Utah 84322-6870

PHONE: (801) 750-2029

FISCAL AGENCY: Utah State University

CO-DIRECTORS: Glendon Casto and Karl White
PRINCIPAL INVESTIGATORS: Steven Barnett, Thomas Scruggs, and Margo Mastropieri

MAJOR OBJECTIVES:

- To review the findings of previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus, and to update this review annually and integrate the findings from this update with the institute's own ongoing work.
- To conduct an integrated research program (including longitudinal research) focused on important problems and cost effectiveness issues encountered at typical service settings.
- To disseminate information about the institute's findings and products to a broad audience of professionals and families.
- To train graduate students and research assistants in research techniques and effective methods of intervening with preschool handicapped populations.
- To evaluate formally the impact of the institute's findings and products on the field of early intervention.
- To solicit input, criticism, and feedback from a broad constituency (advisory committee members and others) to ensure that the institute's direction and procedures are appropriately focused and are being carried out in a way that will result in the broadest possible impact.

MAJOR ACTIVITIES:

Using meta-analysis techniques, the institute is continuing to review and integrate findings from the hundreds of completed research reports concerning early intervention with handicapped preschoolers. During the preceding year, the results of single-subject studies were analyzed and integrated into the data set. Currently the institute is conducting studies of the cost effectiveness of different intensities of parental involvement in early intervention. The importance of age at the start of early intervention is being studied with handicapped infants who have suffered varying degrees of intro-ventricular hemorrhage.

RESOURCES AVAILABLE:

Meta-Analysis Training, Cost Analysis Training, an annotated bibliography of early intervention research studies, a compendium of assessment instruments, and 40 publications and research reports are available from the institute.

START

State Technical Assistance Resource Team

ADDRESS: START
500 NCNB Plaza
Chapel Hill, North Carolina 27514

PHONE: (919) 962-2001

SPECIALNET USER NAME: FPGCENTER
SCAN USER NAME: MRRC.NC

ADMINISTRATIVE/
FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

DIRECTOR AND
PRINCIPAL INVESTIGATOR: Pascal Trohanis

OBJECTIVES:

- To help each state develop and implement a plan for the comprehensive delivery of services to young handicapped children birth to age 5 years and their families.
- To promote collaboration and cooperation among programs and individuals.
- To increase awareness regarding proven program models and other information necessary to design comprehensive service systems for young handicapped children.
- To assist states in addressing common, unresolved concerns and issues about comprehensive service delivery.
- To determine the effectiveness and impact of START in providing technical assistance.

SERVICES:

START provides technical assistance (TA) to the HCEEP state plan grant program in all states, territories, and the District of Columbia. START is coordinated by the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill. The National Association of State Directors of Special Education (NASDSE) is a subcontractor to START. START acquires, analyzes, synthesizes, and disseminates useful information and practices. The resources and TA provided by START seek the active involvement, collaboration, and linking of state and federal personnel, experts, parents, and other TA staff providers for the successful accomplishment of state plan grant goals and objectives.

START provides assistance to HCEEP state grantees through various strategies. These include onsite consultation, information searches, small group workshops, large conferences, telephone consultation, and review/critiques. The content of the TA covers such topics as needs assessment, interagency planning, comprehensive service delivery systems, and parent involvement.

PRODUCTS AVAILABLE:

START developed several publications during its first year of operation. In addition to the quarterly newsletter, State Newsline, START has produced the State Resource Directory (1985) and monograph, Interagency Evaluation (1985). Resource packets also have been prepared on state legislation, needs assessment, Developmental Disabilities, MCH block grant, and tracking.

TADS

Technical Assistance Development System

ADDRESS: TADS
500 NCNB Plaza
Chapel Hill, North Carolina 27514

PHONE: (919) 962-2001

SPECIALNET USER NAME: FPGCENTER
SCAN USER NAME: MRRC.NC

ADMINISTRATIVE/
FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

DIRECTOR AND
PRINCIPAL INVESTIGATOR: Pascal Trohanis

SERVICES:

TADS provides technical assistance to 103 demonstration projects and 24 outreach projects of the Handicapped Children's Early Education Program (HCEEP). TADS coordinates TA services through a central staff located at the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill and draws on a bank of consultants and other resources throughout the country. TADS provides direct and comprehensive TA to first- and second-year demonstration projects, whose staff members work with TADS staff or consultants to assess project needs and agree on plans for services designed specifically to address those needs. TA services address areas such as program planning, evaluation, curriculum development, services to children, parent involvement, staff development, demonstration and dissemination, continuation funding, and project administration. TADS regularly publishes the Dear Colleague Letter and the annual HCEEP Overview and Directory. TADS also provides assistance to other professionals, state agencies, and SEP programs outside of HCEEP.

PRODUCTS AVAILABLE:

Over the past 14 years, TADS has developed many publications as part of its technical assistance services. A complete list is available from TADS. Selected publications include: Microcomputers for Early Childhood Special Education (1985); A Guide to Measures of Social Support and Family Behaviors (1985); An Introduction to Planning Local Programs for Young Handicapped Children (1985); Planning Programs for Infants (1985); Outreach and States Working Together (1985); Common Outreach Indicators (1985); The Handicapped Children's Early Education Program Directory (1984-85 edition); Adult Education: Theory and Practice (1985), Assessment of Child Progress (1985), Time Management (1985), Benefits of Early Intervention (second edition, 1984); Evaluating Interagency Collaboration (1984); Planning for Dissemination (1983); Print (1983); Competency-Based Teacher Education (1983); CBAM (1983); Mainstreaming in Early Education (1983); Affecting State Legislation for Handicapped Preschoolers (1983); Six State Collaborative Projects (1983); Analyzing Costs of Services (1982); Interagency Casebook (1982); Curricula for High-Risk and Handicapped Infants (1982); Issues in Neonatal Care (1985); Strategies for Change (1982); Early Childhood Special Education Primer (1981); Planning for a Culturally Sensitive Program (1981); Gathering Information from Parents (1981);

Special Education Mandated from Birth (1981); Serving Young Handicapped Children in Rural America (1980); Planning Services for Young Handicapped American Indian and Alaska Native Children (1980); The Young Black Exceptional Child: Providing Programs and Services (1980); Finding and Educating the High-Risk and Handicapped Infant (1980); Program Strategies for Cultural Diversity: Proceedings of the 1980 HCEEP Minority Leadership Workshop (1980).

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